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ABSTRACT

This manual provides a reference source for use by sponsor organizations of the Child and Adult Care Food Program (CACFP) in training family child care providers. The manual begins with separate introductory sections for trainers and for providers. The trainer's section includes materials on: how adults learn, strengths and limitations of various types of training techniques, facilitating caregiver skills, and 28 elements of a successful workshop. The providers introduction is primarily an outline of responsibilities of providers participating in the CACFP. This section lists responsibilities of the federal government, state agencies, the sponsor, and the provider. The manual itself contains six chapters as follows: (1) "Mealtime in the Family Child Care Home," on how children are fed, feeding relationships, eating behaviors with respect to physical and social development, and promoting healthy attitudes toward food and eating; (2) "Understanding Dietary Guidelines," on nutritional information for providers with some background in that area and for those without; (3) "Change Your Diet: Making the Dietary Guidelines Work for You" (formatted as a workbook), on issues related to change and teaching providers how to evaluate diets, set goals, develop plans for meeting new goals, and monitor dietary progress; (4) "Hungry Bodies, Hungry Minds: Recipes and Learning Activities for Children," listing 100 nutritious recipes for children, with suggestions for involving them in preparation; (5) "Protecting Children's Health: Preventing Infectious Disease and Food-borne Illness," on preventing disease and illness, developing a health policy, and purchasing, storing, preparing, and serving food safely; and (6) "Healthy Children in Safe Environments," on child health in relation to the day care setting, including immunizations, poison prevention, prevention of lead exposure, and oral health. (ET)

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Promoting Wellness

A Nutrition, Health and Safety Manual for Family Child Care Providers

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Save the Children®
Child Care Support Center
Atlanta, GA.

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Dear Reader:

At Nestlé, we take pride in our long-standing commitment to good nutrition and health for people around the world. We are especially pleased to have been part of an exceptional partnership with Save the Children Child Care Support Center in Atlanta to address the special needs of children in family day care.

We would like to take this opportunity to commend Save the Children, particularly Pam Tatum and Nancy Travis for all their efforts to bring about this Family Day Care Provider resource book. Many hours of research, writing, and testing went into the production of this comprehensive and informative manual.

This book not only provides very sound nutritional information based on many of the new findings of the U.S. Department of Agriculture, but it goes further and to give the reader very thorough and personal guidelines to follow.

Nestlé is pleased to have underwritten this publication. We wish Save the Children continued success in its efforts to look after the children of this nation and around the world.

Sincerely,

Joe Weller

Joe Weller

Trainer's Introduction

Designed to accompany

Promoting
Wellness

A Nutrition,
Health and Safety Manual
for Family Child Care Providers

This manual was made possible by an educational grant from Nestle USA, Inc. to
Save The Children Child Care Support Center.

This manual was designed for use by sponsor organizations of the Child and Adult Care Food Program in training family child care providers. It is our hope that sponsor organizations will give each provider her own copy when she enrolls in the food program.

Although the manual is not a book most providers will want to read from cover to cover, it is a good **reference book** for them to have on hand. It is a book a provider can turn to when she has a nutrition or health and safety question or when she is looking for a new recipe or fun activity for the children. It is also a book designed to assist providers in making dietary changes. Chapter 4 is designed as a workbook with spaces for providers to evaluate their diets and record their goals and their personal plans for achieving them.

Finally, this manual is a **resource for trainers.** With its wealth of information, the manual provides numerous options for training and workshop topics.

Several steps were taken to see that the manual is trainer friendly as well as provider friendly. Here are some important features of the manual.

- **Information is presented at different levels so that the manual can be used for training providers new to the CACFP, as well as those who have been in the program for many years.** There is "Primary Information" (information every provider should know) and "Supporting Information" (for the provider who wants to know more.) Trainers may choose to focus training sessions on the primary information and refer interested providers to the supporting information on a topic, or they may wish to go into more depth on a particular topic and therefore use both the Primary and Supporting Information for training sessions.

- Many sponsor organizations produce provider newsletters and even more would like to if only they had more resources. **We have included short articles that might be appropriate for reprinting in newsletters.** These are referred to in the manual as "Special Issues." We invite sponsor organizations to reprint the "Special Issues," as well as any other part of the manual they find appropriate, in their provider newsletters. There is no need to contact Save The Children for permission. We simply ask that you credit this manual.

- **This manual is designed to fit in a 3-ring binder.** This kind of packaging allows sponsors to add information related to their food program to the manual and makes the materials easy to update. In addition, this gives trainers greater flexibility is designing their training or workshops by allowing them to remove selected chapters or pages or even to reorganize the entire manual. For example, Chapters 2 and 3 are organized around the dietary guidelines for Americans. Chapter 2 explains the dietary guidelines and Chapter 3 helps providers change their diets to meet the dietary guidelines. Trainers may choose to focus a training session on only one of the dietary guidelines. In that case they would choose only the sections related to that particular dietary guideline from each of the chapters.

- **A table of contents is provided for each chapter, and in the case of Chapters 3 and 4, for each section of the chapter.** The tables of contents not only make it easy to locate specific information, but as you will see, are worded in such a way as to assist trainers in developing appropriate learning objectives for that chapter or section of a chapter.

- All trainers who have worked with family child care providers know that providers want information that they can use to improve their family child care home. We have done our best to address this need and **have included several helpful charts and lists and pages of practical suggestions.** If you do not give your providers the entire manual, please use these charts, lists and pages containing practical suggestions as hand-outs during workshops or home visits. Hand-outs will encourage providers to see you as an ally in their efforts to provide quality child care to the children in their child care home.

- Some providers who participated in our focus groups requested hand-outs to teach parents about their child's nutritional needs. The **"Parents Pages" were included** in response to this request. The "Parent's Pages" are information sheets providers can copy and give to the parents of the children in their care. If you are not giving each provider a copy of the manual containing these pages, use the pages as hand-outs during workshops or home visits. **They will be educational for the providers as well as parents.**

Although the major focus of the manual is nutrition, others topics are also addressed. Here is a brief description of each chapter.

Chapter 1: Mealtime in the Family Child Care Home

This chapter addresses how we feed children. It explores the feeding relationship, family style dining and eating behavior in terms of children's physical and social development. It is designed to help providers feed children in a way that promotes a healthy and positive attitude about food and dining.

Chapter 2: Understanding The Dietary Guidelines

This chapter adapts the United States Department of Agriculture's dietary guidelines for Americans to the needs of children. Nutritional information is presented at two different levels to address the training needs of providers with no prior nutrition training and the training needs of providers who are somewhat knowledgeable about nutrition.

Chapter 3: Changing Your Diet: Making the Dietary Guidelines Work for You

Family child care providers typically cook and serve the same foods for the children in their care as they do for themselves and their families. Therefore, changing the children's diets means changing their own diets. This chapter, formatted like a workbook, addresses issues related to change and teaches providers how to evaluate their diets, set dietary goals, develop a plan for meeting their goals, and monitor their progress.

Chapter 4: Hungry Bodies, Hungry Minds: Recipes and Learning Activities for Children

One of the best ways to teach children about food and nutrition, and to introduce them to new foods, is to involve them in food preparation. This chapter presents approximately 100 nutritious recipes for children. Each recipe includes suggestions for involving the children in preparation. As a bonus this chapter also offers fun arts and crafts activities and games designed to teach children about food and nutrition.

Chapter 5: Protecting Children's Health: Preventing Infectious Disease and Foodborne Illness.

This chapter provides basic information about preventing infectious diseases and foodborne illness. It includes instructions for proper handwashing, diaper changing and the sanitation of toys, equipment and surfaces. It also contains guidelines providers can use in developing their health policy and tips on purchasing, storing, preparing, and serving food safely.

Chapter 6: Healthy Children in Safe Environments

This chapter provides basic information about child health and safety concerns. Topics covered include immunizations, exercise, dental health, lead poisoning, and the safe and proper use of car seats. This chapter also includes a health and safety checklist providers can use to check their family child care home for safety.

Ultimately, each sponsor organization will makes it's own decision about distributing and using this manual. For a variety of reasons, some sponsor organizations may not choose to distribute a manual to each of their enrolled providers. **If your sponsor organization does not plan to distribute a copy of the manual to each provider, consider these alternatives:**

- **Organize your training around a section or sections of the manual. Select important pages from these sections or use entire sections for hand-outs during the training.**
- **Reproduce pages of the manual in your newsletter.**
- **Never let your home visitors show up at a provider's home empty handed. Have them copy pages to use as hand-outs when they visit providers' homes.**
- **Make copies of the manual available on loan to providers though your lending library or resource rooms in the communities you serve.**
- **Use your newsletters to let providers know the manual is available. Include an article describing the contents of each chapter. Encourage providers to request a copy of the manual or chapter of interest and have home visitors loan or give providers the requested copy.**
- **Establish a distribution target for your program. When your staff reads menus, have them make a note of providers whose menus need improvement and mail or let home visitors deliver the relevant sections of the manual that will benefit the provider.**

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The Child and Adult Care Food Program Sponsor's Forum

The Staff of Save The Children Child Care Support Center

How Adults Learn

In order to use this manual to design effective training for your providers, it is helpful to understand how adults learn. **Here are some characteristics of adult learners that you should keep in mind as you develop your workshop or training program.**

1. Studies show that after 60 days, adults remember only 25% of what they hear and only 45% of what they hear and see. These are not inspiring numbers for an educator or trainer who hopes to have lasting impact. Fortunately, by adding an activity or a "doing" component to your training or workshop, you can increase what adults remember to about 70%. In other words, **if you want adults to learn and to remember what they learn, involve them actively in the learning process.**

2. **Adult learners are highly pragmatic**. They have a need to apply what they learn to "real-world" concerns and situations. Further, they must feel that what they are learning is meaningful and worthwhile and applies to their life situation. This is one of the factors that led to the development of a nutrition training manual designed especially for family child care providers. Consider this point when you select training materials. If you use materials that are not designed for providers, adapt them to a provider's needs. Don't make it the provider's responsibility to relate the lessons to their particular situation.

3. **Adults bring knowledge and experience to their learning and are motivated by training materials and methods that refer and relate to the learner's past experiences.** Experience seems to be among the best teachers when it comes to child care, and as a trainer, experienced providers are among your best training resources. Give providers credit for their knowledge and experience, and an opportunity to share it with other providers.

4. **The ideal environment for adult learning is one which encourages group discussion and places emphasis on interactions, processes, and skills development.** Have adult learners sit in circles, in U-shaped seating arrangements or in small groups. This facilitates interaction. Placing adults in rows, sitting one behind the other, with you lecturing from the front of the room is a quick way to *limit* group interaction and learning.

5. **The ideal learning dynamic for adults is one that allows participants to debate, challenge and share ideas.** Successful trainers listen to and respect the opinions of learners, encourage learners to be resources to them and to each other, and above all, remember to treat adult learners like adults.

From: Zimmerman, et al., "Qualitative Research for Program Development: A Training Curriculum," PATH (Program for Appropriate Technology in Health), Washington, D.C., 1991.

Seven Conditions of Learning for Adult Learners

Adult learners learn more when:

1. They feel a need to learn.
2. The learning environment is characterized by physical comfort, mutual trust and respect, mutual helpfulness, freedom of expression, and acceptance of differences. Learners feel supported; never judged nor threatened.
3. They perceive the goals of a learning experience to be their goals.
4. They accept a share of the responsibility for planning and operating a learning experience, and therefore have a feeling of commitment toward it.
5. They participate actively in the learning process.
6. The learning process is related to and makes use of their experiences.
7. They have a sense of progress toward their goal.

From: Knowles, M.S. The Adult Learner: A Neglected Species. Houston: Gulf Publishing Company, 1984.

Even though adult learners share many characteristics, there are variations in learning styles within the group. Some adults learn by reading or listening to lectures, some learn best by doing, and still others learn best by interacting and sharing thoughts and ideas with others.

- In individual training or training provided through a monitoring visit, personalize the training for the provider's learning style.

- **In a group training or workshop situation, recognize the variety of learning styles and employ a variety of techniques and formats in training.**

The list that follows presents the strengths and limitations of a variety of training techniques. Refer to this list when you are designing group training workshops.

Strengths and Limitations of Training Techniques

Format/Technique: **Lecture (or mini lecture)**
Strengths: Efficient means of transmitting facts. Mini-lectures of a few minutes work better in an adult learning setting.
Limitations: Participants may lose interest; no immediate feedback; difficult to verify if facts were understood; minimizes participation.

Format/Technique: **Large Group Discussion**
Strengths: Establishes group identity, so well suited for groups that will meet for training more than once. Allows question-and-answer participation.
Limitations: Consumes time; difficult to manage; has potential to compromise leadership; excludes shy participants.

Format/Technique: **Small Group Discussion**
Strengths: Allows in-depth discussion; skills practice; exploration; active participation. Good for shy people.
Limitations: A leaderless group may become lost; valuable feedback may not reach the whole group.

Format/Technique: **Role Plays and Real Plays**
Strengths: Simulates real-world situations; generates discussion; allows skills practice; can be entertaining and stimulate interest.
Limitations: Requires a degree of trust among group members; need processing to tie role plays back to the learning objectives of the training; need monitoring and sometimes assistance staying on track.

Format/Technique: **Group Games and Exercises**
Strengths: Stimulate relaxed atmosphere for learning; can make dry facts fun and build camaraderie.
Limitations: May drift off point; must be processed effectively to relate to the learning objectives of the training.

Format/Technique: **Audiovisuals: slides, film/video, filmstrips, models**
Strengths: A good way to demonstrate new skills or illustrate facts; stand in when real-life observation is not possible; taping of participants can also be used as feedback in skills development.
Limitations: Interactive methods (e.g., taping of performance) should be used sensitively.

Format/Technique: **Demonstration/modeling behavior**
Strengths: Provides motivation and standards for participant performance; enhances assimilation of skills and correction of mistakes.
Limitations: May cut off creativity. In some instances, may be appropriate following, rather than preceding, role playing by participants.

Format/Technique: **Reading**
Strengths: Can be done without a trainer's supervision; allows absorption of large amounts of material.
Limitations: Must be discussed or acted upon for maximum retention.

From: Zimmerman, et al., "Qualitative Research for Program Development: A Training Curriculum," PATH (Program for Appropriate Technology in Health), Washington, D.C,, 1991

Facilitating Skills

Adults learn best when they participate actively in the training process. Effective facilitation skills encourage involvement by showing interest in the participants and making them feel free to comment and ask questions. **Their are 4 basic interpersonal communication skills that are used in conducting effective training in both one-to-one and group situations. These are:**

1. Attending (non-verbal)	Face the trainees. Maintain appropriate eye contact. Move toward the trainees. Avoid distracting behaviors.
2. Observing (non-verbal)	Look at the person's face, body position, and body movements. Formulate an inference of the person's feeling based on what you have observed.
3. Listening (verbal)	Listen to the words being expressed. Listen to the tone of the voice as well as the words; are participants bored, enthusiastic, uncomfortable, angry? Paraphrase what was said to ensure understanding.
4. Questioning (verbal)	Ask open-ended questions. Respond positively to trainees' answers to questions. Respond to trainees' questions by enlisting input of others.

Always use participatory techniques.
The more you involve the learner, the more they learn.

From: Zimmerman, et al., "Qualitative Research for Program Development: A Training Curriculum," PATH (Program for Appropriate Technology in Health), Washington, D.C,, 1991

Ingredients For A Successful Workshop

Developing a workshop for family child care providers is simple. It is developing a workshop that holds the providers' interest while sharing useful knowledge and skills that can be a challenge. The list of ingredients that follows will help you to make your workshop a success with family child care providers.

1. Choose topics that meet the needs of family child care providers.
Providers will be interested in topics that help them deal with the challenges and issues they face in their personal and professional lives. They will be motivated to learn creative ways for dealing with any of these basic "needs."

2. Incorporate practical, usable information.
Although the theoretical information has its place, most providers will be interested in a common sense approach to a topic. They will appreciate ideas that help them meet every day challenges with confidence and expertise.

3. Know your subject matter well.
"Faking it" won't work with providers or any other group of adult learners. They expect their instructor to know more about the subject matter than they do. Thoroughly saturate yourself with knowledge of your topic before attempting to "teach" others about it.

4. Prepare to meet a wide range of expectations.
Every group of adults will bring different perspectives and expectations to a workshop. Be prepared to answer tough questions and respond to different viewpoints. Flexibility is the key to satisfying the needs of the group.

5. Plan to use a multi-media approach.
The use of a variety of presentation methods will add interest to any session and increase the potential for all participants to grasp the concepts being presented. Whenever possible, incorporate other viewpoints through the use of videos, tape cassettes, etc.

6. Use visual learning aids to facilitate learning.
Emphasize main concepts through the use of clearly printed, legible visual aids. The use of an overhead projector or flipchart are popular methods of incorporating visual organization into a presentation.

7. Practice Presentation skills.
As corny as it sounds, nothing can beat the effectiveness of practicing your presentation in front of a mirror. Relax, use a pleasant tone of voice, and appropriate body language. Make adjustments if certain parts of the presentation seem to drag and get an idea of the time involved in presenting each concept thoroughly.

8. Review the Training Location.
Get familiar with the seating arrangement, lighting, chalkboard, and other functional details of the room. Plan to make adjustments as necessary.

9. Validate training through student participation.
Adults learn best when they are "in charge" of their own learning process. Find ways for adults to participate in setting the workshop goals, hands-on exercises, and evaluating the effectiveness of the learning situation.

10. Arrive early to set up the room for training.
Adjust chairs and tables as desired. Set up presentation materials so that everything is accessible and ready to be used. Check the room temperature to be sure it is set at a comfortable level.

11. Consider offering refreshments.
A fresh pot of coffee, a pitcher of juice, and a plate of cookies or fruit go a long way in helping adults feel welcome and comfortable.

12. Greet each participant as they arrive.
Adult learners are more cooperative and participatory when they are greeted warmly and sincerely. Standing near the entryway to greet each student offers an opportunity to make your adult learners feel comfortable.

13. Make introductions easier with name tags.
Name tags can be the office supply store "Hello, my name is..." variety or a nice extension of the theme of the workshop. The use of name tags helps everyone to learn each other's name without having to repeatedly ask someone.

14. Break the ice with warmup activities.
By initiating a warm-up activity, participants immediately begin interacting with one another and do not get frustrated waiting for the session to begin.

15. Start the session on time.
Prompt adherence to the planned schedule demonstrates respect for the time participants have devoted to (and sometimes paid for) the learning experience. Keep in mind that the impression formed during the first three minutes of the session will set the tone for the entire workshop.

16. Take time to get acquainted.
Adult learners need the opportunity to become part of a group before they will feel comfortable enough to share their experiences. By introducing themselves and providing information about who they are, individuals discover how they fit in to the group and find ways to function together.

17. Establish ground rules.
Take responsibility for establishing a "safe" learning environment. Make it clear that everyone is welcome to participate, everyone's opinions are valued, and everyone has a right to be there. Ridicule, prejudice, conversational monopolies, or pressure to perform have no place in an adult learning environment.

18. Set specific goals and objectives.
Get a feel for the needs and expectations of the group. Develop a clear-cut plan for meeting those needs. Be clear about which objectives must be met and which are flexible.

19. Appeal to all 5 senses.
The more ways learners receive information, the more likely they are to internalize it. A straight lecture approach will result in an average of 8% retention for most participants. By providing opportunities to hear, see, touch, feel, and smell, all types of adult learners are able to respond to their personal learning style in receiving new information.

20. Empower students to become active learners.
Use a variety of participatory and sensory learning techniques to draw the participants out of themselves. By providing hands-on learning experiences, the process takes on personal meaning and provides an opportunity for participants to truly master the concept.

21. Honor individual participation comfort levels.
While everyone should feel free to participate, active participation should not be forced. In any group situation there will be those who prefer to sit back and absorb all that is happening. Everyone should have the right to "pass" on any activity they do not feel comfortable actively participating in.

22. Refuse to allow conversational monopolies.
Input from all students should be welcomed and encouraged. However, allowing a few people to continually monopolize class time with their "life story" is sure way to alienate others in the group. Keep conversations directed and focused to avoid this embarrassing scenario.

23. Be considerate of physical needs.
There is a lot of truth to the statement "The mind can only absorb what the seat can endure." Remember that most providers will have already put in a 8 - 12 hour day. Allow adequate "stretch and snack" breaks.

24. Keep interest through variety.
Keep participants involved in the workshop by utilizing a variety of techniques. Incorporate lecture, discussion, hand-outs, group activities, and written assignments to keep the pace lively and entertaining.

25. Share resources to encourage growth.
Be prepared to supply the names of books and other resources that would offer interested learners an opportunity to pursue additional information on a topic.

26. Add a finishing touch to each session.
Adults need the opportunity to feel finished, say good-bye to the group, and gain their sense of oneness. Prepare a closing exercise that will reiterate major objectives of the workshop, have clear directions, require total group participation, and celebrate the learning experience.

27. Evaluate the workshop effectiveness.
Provide participants with a forum to honestly evaluate the presentation or workshop. Adult learners need to share the growth and/or frustrations fostered through the learning situation. Ask candid questions about the strengths and weaknesses of your presentation and be prepared too make adjustments in future presentations.

28. Conclude each session on time.
Prolonging a workshop past the scheduled ending will close the workshop on a negative note. Honor the adult learner's need for a predictable schedule and show her respect. Begin and end on time.

From: Anita Payne, Director of Child Care, Frank Porter Graham Child Development Center, University of North Carolina, Chapel Hill, North Carolina, July, 1993.

About Family Child Care Providers

In addition to information about how adults learn, there are some general characteristics of family child care providers and their work that you should remember when you plan a workshop or training event.

- Although family child care has been around for a very long time, it has only been within recent years that providers have begun to think of themselves as professionals. Some people, a few providers included, still think of family child care as little more than "babysitting." This image fails to acknowledge the vast array of skills required in family child care and the important role child care providers play in the lives of young children and their working parents. In addition, this "babysitter" image does not encourage or support professional development and training among providers. **Always treat family child care providers as the valuable professionals they are. Do what you can to promote professionalism in family child care.**

- Family child care providers come from variety of cultural and educational backgrounds and bring with them a large variety of skills and interests. Some of them received their family child care training from other providers, others have graduate degrees in early childhood education, and still others learned "on the job." Some providers will come to your training with a great interest in nutrition, health and safety, while others may be there primarily to meet a training requirement. Although this diversity within the profession is one of its strengths, it can make training more challenging. **As a trainer, remember that family child care providers may reflect more diversity than many other groups you might train and develop your workshops accordingly.**

- Most family child care providers work long hours. In most cases, by the time they reach your workshop they have put in more than a full day's work. Do what you can to make providers comfortable. Provide them with snacks and stretch breaks. Above all, do not waste a provider's time. **Always come to your training sessions well prepared and ready to capture providers' interest. Make a habit of starting and ending your sessions on time.**

- Many providers are relatively isolated from other family child care providers. They spend their days caring for children and may have little opportunity or energy to form professional relationships. Professional relationships are important for a number of reasons. They support the image of the provider as a professional, they give providers a chance to share their knowledge and experience, and they provide a forum for mutual support. **Allow some time during your workshops for providers to socialize and get to know one another. Engage in an activity that encourages interaction prior to your workshop breaks. Your workshop may be one of providers' few opportunities to meet other providers and learn of other training opportunities or professional organizations in their area.**

For additional copies of the manual
call 404•885•1578,
or write
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Trainer's Evaluation

**After you have had an opportunity to use this manual,
please help us to improve it by completing the following evaluation.**

Mail the evaluation form to:
Manual • Save The Children • 1447 Peachtree St. NE • Suite 700 • Atlanta, GA • 30309

1. On a scale of 1 to 5, with **1 being poor** and **5 being excellent**, how would you rate the **contents** of the training manual? ________

2. Did we leave out any important information?______ If so, please specify. ________________________

____

3. Was there any information included that you think should be left out in future editions of the manual? If so, please specify. ____

____

4. Which chapter of the manual needs the **most** improvement? ______ What would you do to improve it?

____

____

5. On a scale of 1 to 5, with **1 being very difficult** and **5 being very easy, how easy** was the manual to use in designing and conducting training for family child care providers? ________ What can we do to make the manual easier for you as a trainer to use? ________________________________

____

6. On a scale of 1 to 5 with **1 being not clearly at all**, and **5 being very clearly, how clearly** was information presented? ______ How could we be clearer in our presentation of the information? __________

____

7. Has your sponsor organization reprinted any of the "Special Issues" or other pages in your organization's newsletter? ______ yes ______ no. Does it plan to? __ yes __ no

8. How does/will your sponsor organization distribute the manual to providers? (check all that apply)
   - __ give each provider a copy of the entire manual
   - __ give each provider selected chapters and/or pages
   - __ use selected pages as hand-outs during training
   - __ loan copies to providers
   - __ other. Please specify. ______________________________________

   ____

9. Please give any additional comments or suggestions for improving the content, format, or distribution of the manual. ____

____

10. Which chapters of the manual have you used in designing your training? (check all that apply)
   __ chapter 1 __ chapter 2 __ chapter 3 __ chapter 4 __ chapter 5 __ chapter 6

11. Your name, sponsor organizations and work phone (optional). ____________________________

____

PROVIDER'S INTRODUCTION

About the Manual

Very few of you will be tempted to sit down and read this manual from cover to cover. And actually, no one expects you to. For the most part, this manual is a reference book. It is written so that you can browse through it and pick out the section or pages of interest to you. Keep the manual handy and refer to it when you have a question about nutrition, health or safety, or when you are looking for new recipe or fun activity for the children. If you can not find the answers to your questions in this manual, call your local Child and Adult Care Food Program Sponsor or your County Extension Service.

For additional copies of the manual,
call 404•885•1578,
or write
Save The Children
Child Care Support Center
1447 Peachtree Street, NE
Suite 700
Atlanta, GA 30309

This manual was made possible by an educational grant from Nestle USA, Inc. to Save The Children Child Care Support Center.

Special Features of the Manual

Family child care providers were consulted throughout the development of this manual. They were seen as our experts on both what information to include in the manual and how to present it. Here are some important features of the manual that were included as a result of provider input.

- **Information is presented at different levels.** Providers who want just the basic information about a topic can read the "Primary Information." Providers who would like more information can also read the "Supporting Information."

- **We have included short articles about related issues that may be of interest to providers.** Many of them are the result of questions asked by providers during provider reviews of the manual. These articles are called "Special Issues."

- **The manual is designed to fit in a 3-ring binder.** This allows you to add your own notes or hand-outs you receive at workshops and to remove recipes or other pages you might want to temporarily separate from the rest of the manual.

- One of the requests we heard over and over from providers was "Give us recipes!" Chapter 4 of this manual contains **more than 100 recipes and even tells you how to credit them on your CACFP menu forms.**

- Providers also expressed an interest in teaching children about nutrition in a way that would be fun and entertaining. **We included several arts and crafts activities and games in Chapter 4. In addition, with each recipe we suggest ways that children can help. Before you try any of these suggestions, read the introduction to Chapter 4.** It will give you information that will help you to determine if a particular activity is appropriate for the age of children in your child care home as well as information that will help you to make the activity safe and successful.

- To make it easier for you to locate specific information, **a table of contents is provided for each chapter.** In the case of Chapters 2 and 3, a table of contents is provided for each section of the chapters.

- Providers stressed to us that they wanted **useful information and practical suggestions**. Where possible they wanted the information presented in the form of charts or lists that they could post in the kitchen if they chose to. **We have included several chart and lists and pages of practical suggestions.**

- Many providers we spoke with expressed the need to pass on what they learn about nutrition to parents. **With each manual we have included "Parents Pages."** These are information sheets designed for providers to photocopy and give to the parents. With each manual, there is one copy of each of the 5 "Parent's Pages". Use these originals to make your copies.

Manual Overview

Although the major focus of the manual is nutrition, other topics are also addressed. **Here is a brief description of each chapter of the manual.**

Chapter 1: Mealtime in the Family Child Care Home
This chapter addresses how we feed children. It explores the eating relationship, family style dining and eating behaviors in terms of children's physical and social development. It is designed to help you feed children in a way that promotes a healthy and positive attitude about food and dining.

Chapter 2: Understanding the Dietary Guidelines.
This chapter adapts the United States Department of Agriculture's Dietary Guidelines for Americans to the nutritional needs of children. It contains information that will help you in preparing nutritious meals for the children in your care as well as for you and your own family.

Chapter 3: Changing Your Diet: Making the Dietary Guidelines Work for You
For those of you who prepare foods for the children that you and your families will also eat, following the dietary guidelines for the children in your care means changing your and your family's diet. Making healthful changes in your diet is never easy, but chapter 3 is designed to help you. This chapter is formatted like a workbook and is designed to help you evaluate your diet, set goals for change, develop a plan to meet those goals, and monitor your progress. Change is always easier when you have group support. Ask your food program sponsor, or even your professional provider association, for a group workshop using this chapter.

Chapter 4: Hungry Bodies, Hungry Minds: Recipes and Learning Activities for Children
One of the best ways to teach children about food and nutrition, and to introduce them to new foods, is to involve them in food preparation. This chapter presents over 100 nutritious recipes for children. Each recipe includes suggestions for involving children in preparation. As a bonus, this chapter also contains fun arts and crafts activities and games designed to teach children about food and nutrition.

Chapter 5: Protecting Children's Health: Preventing Infectious Disease and Foodborne Illness
This chapter provides basic information about preventing infectious disease and foodborne illness. It includes instructions for proper handwashing, diaper changing, and the sanitation of toys, equipment, and surfaces. It also offers guidelines for you to use in developing a health policy for your child care home and tips on purchasing, storing, preparing, and serving foods safely.

Chapter 6: Healthy Children in Safe Environments
This chapter contains basic information about child health and safety concerns. Topics covered include immunizations, dental health, lead poisoning, and the safe and proper use of car seats. It also provides a health and safety checklist that you can use to evaluate your child care home.

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The members of the Child and Adult Care Food Program Sponsor's Forum

The Staff of Save The Children's Child Care Support Center

About the CACFP

If you have been on the child and adult care food program for long, then you probably have a pretty good idea how it operates in your community. However, you may not be aware of all that goes into the program before it reaches your food program sponsor.

- The Child and Adult Care Food Program is actually a federal program. The federal laws governing the program are established by Congress.
- The CACFP operates in each state through a state agency. In some states the Department of Human Resource is responsible for the program. In other state the Department of Education is responsible.
- A non-profit agency/organization in each community then acts as a sponsor to sponsor family child care homes that wish to participate in the program.

The program responsibilities of the state agency, the sponsor, and the provider are listed on the following page.

The Responsibilities of the Federal Government

The U.S. Congress establishes the laws that govern the CACFP.

The United States Department of Agriculture:

- sets nutritional guidelines
- sets reimbursement rates
- establishes rules and regulation to govern the program
- monitors the state agency responsible for the program in each state

The responsibilities of the state agency

The state agency:

- interprets and explains the rules and regulations established by the U.S.D.A.
- establishes state polices regarding the program
- monitors CACFP sponsors within the state
- provides training to CACFP sponsors within the state

The Responsibilities of the Sponsor

The sponsor organization:

- follows and enforces the rules and regulations established by the U.S.D.A. and state agency overseeing the program
- approves homes/providers for participation in the program
- provides training to participating providers
- reviews menus to make sure snacks and meals are meeting nutritional requirements established by the U.S.D.A. and the state agency that governs the program
- visits providers' homes to insure that their food service program and their homes meet U.S.D.A. and state agency requirements
- handles the paperwork necessary for the reimbursement to providers
- mails providers their reimbursement checks
- furnishes providers with all of the forms necessary to participate in the program

The Responsibilities of the Provider

The Provider is responsible for:

- offering children nutritious snacks and meals in accordance with the U.S.D.A. guidelines
- complying with the rules of the state regulating agency
- keeping records of the foods served and the number of meals served to children
- participating in nutrition training and education programs
- providing children a safe and healthy environment for dining
- acting as a role model by demonstrating healthy eating and appropriate dining behavior to children
- permitting the sponsor to visit the home to answer question and review the food service program
- sending the sponsor the information needed each month for meal reimbursement.
- introducing children to a variety of foods
- teaching children about food and nutrition

Provider's Evaluation

Please help us to improve this manual by completing the following evaluation.
Mail the completed evaluation form to:
Manual • Save The Children • 1447 Peachtree Street, NE. • Suite 700 • Atlanta, GA. • 30309

1. On a scale of 1 to 5, with 1 **being poor** and **5 being excellent, how would you rate the contents of the training manual?** ________

2. Did we leave out any important information? ______ If so, please specify. ____________________

3. Which chapter of the manual needs the most improvement? ______ What would you do to improve it?

4. On a scale of 1 to 5, with **1 being not clearly at all,** and **5 being very clearly, how clearly was information presented?** ________ How could we be clearer in our presentation of the information?

5. Did you make any changes in the snacks and meals you serve to the children in your care or your family as a result of this manual? ______ If yes, please specify. ____________________

6. Did you look at chapter 3 on Changing Your Diet? ______ Did you use the chapter to evaluate your diet and set goals? ______ Do you think this chapter is helpful or could be helpful to you in changing your diet or the foods you offer to the children? ______ Why or why not? ____________________

7. Did you make any changes in your food handling or sanitation practices as a result of this manual? ______ If yes, please specify. ____________________

8. Did you receive a copy of the manual (or part of the manual) from your food program sponsor?
    - ____ yes. If yes, what part did you receive? (Check all that apply)
        - ____ chapter 1 ____ chapter 2 ____ chapter 3 ____ chapter 4
        - ____ chapter 5 ____ chapter 6
        - ____ selected pages. Please specify chapter and page numbers. ____________
    - ____ no. If no, how did you get your copy of the manual or parts of the manual? ____________

9. Please give any additional comments or suggestions for improving the content, format, or distribution of the manual? ____________________

10. (OPTIONAL) If we may contact you for additional comments, please give your name, complete address, and phone number. ____________________

CHAPTER 1

MEALTIME IN THE FAMILY CHILD CARE HOME

INTRODUCTION...

In the introduction you will learn about:

your 4 major mealtime tasks | page 3

This manual was made possible by an educational grant from Nestle USA, Inc. to Save The Children Child Care Support Center.

Before we address the issue of **what** to feed children, we need to look at **how** we feed them, at mealtime in the family day care home.

How we offer children nutritious foods and the mealtime environment we help to create, can impact what foods children eat, how much they eat, and how they feel about food, eating, themselves, and others.

Just as children are not likely to develop a healthy diet unless they are surrounded by healthy food choices, children are not likely to develop a healthy attitude toward food and eating if they do not experience mealtime as a positive, nurturing time.

As a family child care provider you know that there is much more to mealtime than satisfying children's appetites. **There are 4 major tasks to accomplish during mealtime.**

1. **You want children to get the nutrients and calories they need for growth and development.** Children have small stomachs and usually can't eat much in one meal. That is why it is important that the foods they are offered are nutritious and that they are also offered nutritious snacks between meals. Chapters 2 and 3 focus on nutrition and will help you in providing for children's nutritional needs.

2. **You want children to learn about foods and nutrition.** Children need to learn how to make good food choices for themselves. They also find learning fun. One of the best ways to teach children about food and nutrition is through involving them in food preparation. Chapter 4 offers many suggestions of ways children can help you to prepare snacks and meals. It also offers a few special learning activities you and the children might enjoy.

3. **You want mealtime, like the other activities children engage in throughout the day, to contribute toward children's self-esteem.** Two important factors in building children's self-esteem are feelings of control and competency.

   In order to feel some control, children need to be allowed to choose and make decisions for themselves. This is especially important in matters that have to do with their own bodies, like for example what foods to put in their bodies and when their bodies feel full. **Children should be allowed to choose from a nutritious selection of foods, what and how much they eat.**

To develop a sense of competency, children must be allowed to experiment and manipulate things in their world. For example, children should be allowed to serve themselves as soon as they are developmentally capable. They must be allowed to make their own messes and mistakes and learn to recover from them. **As a provider, your role is to structure the mealtime environment in a way that allows and facilitates children's feelings of control and competency. You will learn more about this in this chapter.**

4. **You want mealtime to be a pleasant and enjoyable experience for both you and the children.** Mealtime should be a time of shared conversation, of social and emotional bonding. Children should leave the table satisfied both physically and emotionally. They should be relaxed and ready to move to a quiet activity or nap.

This chapter focuses on helping you to achieve these last two goals. It helps you to understand your role and responsibilities in feeding the children and explains how family style dining can assist you in meeting your feeding goals.

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Feeding Young Children...

In this chapter you will learn about

the feeding relationship	page 7
and family style dining	page 13

There is also a helpful chart on

the development of mealtime behavior	page 16

These is also information on special issues:

introducing children to new foods	page 18
common challenges in feeding	page 19
and what to do if a child is choking	page 22

The Feeding Relationship

PRIMARY INFORMATION

What Every Family Child Care Provider Should Know

Anyone who has ever worked with children knows that you can put food on the table but you can not make the children eat it. Still many of us try. We try bribes- "If you eat your vegetables, you'll get dessert"., threats "You'll have to sit there until you clean your plate", and tricks, {I'll just hide a few peas in this casserole. Lisa will never notice. }

Food fights are battles we are not likely to win. Even if we do manage to get a child to eat the food item once, it is doubtful that he or she will have a good feeling about it and will willingly eat it the next time we offer it. This is why some providers find feeding children frustrating. You can prepare a very nutritious meal only to have some children refuse to eat part of it. And if, for example, they choose to only eat the meat, leaving the vegetables and bread, they are not really getting the well-balanced meal you prepared.

If these concerns or frustrations sound familiar, **remember these 3 points:**

1. **While you don't control children's choices, you do control the foods they get to choose from. If children can only choose from nutritious offerings, they will make nutritious choices.**

2. **In terms of getting a well-balanced meal, "well-balanced" refers to their overall diet, the snacks and meals they eat over a period of a few days. Research has shown that even children who go on food jags in which they seem to only eat a few specific foods, will naturally eat a balanced diet over time. (Food jags are discussed further on page 20.**

3. **You can offer children foods, and even encourage them to try foods, but stay out of food fights. As a provider, your energies are best spent in preparing nutritious snacks and meals for children and providing them with a positive, nurturing environment in which to eat them.**

In order to make mealtime a self-esteem building experience for children, and an enjoyable experience for everyone, it is important to understand what part of mealtime is your responsibility and what part is the children's responsibility. In her book How To Get Your Child To Eat... But Not Too Much, Ellyn Satter (1987, Bull Publishing Co. Palo Alto, CA.) divided the responsibility of the provider and the responsibility of the child in the following way.

The responsibilities of the provider are:

- **Selecting and buying food.**

You are responsible for purchasing food that is safe, nutritious, and appetizing. You are also responsible in part for introducing children to the wide variety of available foods.

Some parents have little time in their schedules for introducing children to new foods and experimenting with a variety of ways to prepare them. Instead, they may choose foods that are easy to prepare and that they know their children will eat. Most of you serve the children in your care 2 meals and two snacks, five day a week. That makes up a large portion of a child's overall diet. You have many opportunities to introduce children to new foods and to help them to develop heathy eating habits.

Try to disregard your ideas about what children will and will not like and serve them a wide variety of foods. (For more information on introducing children to new foods, see the special issue on page 18. You will read more about the importance of serving a variety of foods in Chapter 2.)

- **Making and presenting meals.**

It is the provider's responsibility to give children well balanced meals and nutritious snacks. (Chapters 2,3, and 4 will help you meet this responsibility.) It is also important that food be presented in a way that encourages children to eat it.

The way foods are presented seem to matter a great deal to some children. Many times a child will decide, simply by looking, whether or not they are willing to try a new food. Many children will not eat vegetables that are over-cooked and "mushy" looking. For some reason, many 2 year olds like to keep foods separate from one another. Not only do they not want their carrots and peas cooked together, but some two year olds don't even want them to touch each other on the plate. Some children will eat a sandwich cut diagonally, while they won't take one bite if the sandwich is cut in squares.

When it is possible, consult the children about how they want their foods to look. Also try to make foods interesting to children by offering a variety of colors, shapes and textures. Consider letting the children help you in preparing snacks and meals. (Chapter 4 will give you several ideas about ways children can participate in making and presenting meals.)

- **Regulating the timing of meals and snacks.**

Children need regular eating times for meals and snacks so that they can learn to regulate their own eating. Of course, you should not make children eat just because it is lunch time or punish them for not eating. However, you must set limits. **Establish regular eating times and stick to them. Let children know that there will not be another opportunity to eat until the next snack time or meal time.** Children will soon become accustomed to your eating schedule.

As with most rules, there are some exceptions. Some parents may bring their children to your home after you have served breakfast. Don't just assume that because you have served breakfast, children arriving later have already eaten. Ask them if they have had breakfast. If they have had breakfast, find out what they ate and when. They might have eaten a very small breakfast, for example, only a piece of toast, or have eaten much earlier than the other children in your care. They may not be able to wait until the morning snack.

In some states providers enrolled in the CACFP must offer children food at regular intervals. For some states food must be offered every 4 hours. In other states food must be offered every 2 hours. Become familiar with your state's regulations. Post your feeding schedule with your weekly menu.

- **Presenting food in a form children can handle and can eat safely.**

Most children are messy eaters, regardless of how you present the food. Children younger than 18 months will not be able to use utensils. They will eat with their hands. After 18 months they will begin learning to use utensils, but it will still take them a while to develop the motor skills and coordination needed to use utensils well. **Give children the freedom to be messy eaters so that they have the opportunity to become good eaters. Don't make a big deal of the messes they make at the table. Just give them what they need to clean up the mess and assist them when and if they need it.**

Toddlers are a special concern when it comes to eating safely. They gag often when they are first learning to eat. **It is normal for children to gag when they are learning to eat.** They have not yet become good at positioning the food in their mouths. When the food slips back on their tongue, they automatically gag. **If a child is coughing forcefully and getting air, let them dislodge the food item on their own. However, if a child is wheezing, gasping, whistling or turning colors, they are choking and need immediate first aid. (See page 22 in this chapter for what to do if a child is choking.)**

In the box below are suggestions of ways you can present foods that will increase children' chances at successful eating. In the box on the right are steps you can take to prevent choking.

Making Foods Easy For a Toddler to Eat

- Cut foods into bite-sized pieces, cut meat up finely.
- Make some foods soft and moist.
- Serve foods near to room temperature.
- Substitute ground beef patties for steaks or chops.
- Serve salads without dressing as finger food.
- Make soups thin enough to drink or thick enough to spoon.
- Give children a plate or bowl with sides to push the food against.

Preventing Choking

- **Gradually build a child's feeding skills;** let her work up slowly to more difficult foods.
- **For the child under three, avoid foods that are hard to control in the mouth, chew and swallow.** This includes nuts, raw carrots, gum drops and jelly beans. Do not serve hard candy, raw vegetables and fruits, grapes, raisins, seeds, corn, peanut butter, popcorn, pickles, nuts, olives, or thick sticky cheese foods to children until after their 2 year molars have appeared and they are chewing with them. **If you serve hot dogs, the number one cause of choking in children, quarter them lengthwise to reduce the risk of choking.** If you serve a food which contains pieces of hot dogs, like Beans and Franks, quarter the pieces so that they are not circular. Other foods might also be modified to reduce the risk of choking. For example, grapes can be quartered and carrots cooked.
- **Always be present during feeding.** Never let other children supervise.
- **Keep children seated while they are eating.** Most choking occurs when children are on the run.
- **Keep things calm at eating time.** When children scream or laugh they catch their breath and they could inhale food causing them to choke.

(The information on making foods easy for a toddler to eat and preventing choking comes from Ellyn Satter, 1987, How to Get Your Kid to Eat... But Not Too Much, p.185-186, Bull Publishing Co., Palo Alto, CA.)

- **Making mealtime pleasant.**

There is much you can do to make eating time pleasant and relaxed. Consider the suggestions below.

Have a quiet transition activity to move from more active play to dining.

If the children have been real active prior to a meal, it might be difficult for them to sit at the table and focus on eating. Try giving children a few minutes to look at a book, tell them a story, or let them help you set the table.

Give children child-sized utensils, tables and chairs.

Give the children child-sized forks and spoons. These will be much easier for them to manipulate. Make sure your tables and chairs are also child-sized. It is very important that children, when seated, have support for their feet. It is usually uncomfortable and sometimes difficult for them to stay in their seats when their legs are left dangling with nothing to support them.

Have patience.

Learn to be comfortable with the slow pace of children's eating as well as the inevitable mess. Children can sense when you are not relaxed and if you are not relaxed, it will be difficult for them to relax.

Engage in quiet conversation.

Join the children at the table and eat with them. Encourage relaxed conversation. This is a good time to discuss the different foods they are eating and teach them about nutrition.

- **Helping the child participate in the meal.**

Help children to participate in all aspects of the meal. This includes food preparation, setting the table, eating, engaging in mealtime conversation, and clean-up. To feel competent, children need to contribute in real ways. Find a role for them whenever you can.

- **Helping the child to attend to his or her eating.**

Some children become easily distracted. In encouraging pleasant conversation, you also want to keep the children focused on eating.

- **Maintaining standards of behavior at the table.**

It is important that children enjoy themselves during the meal, but they also need to learn that some behaviors are not appropriate at the table. Some children may want to walk and eat. Let them know that eating is a time for everyone to gather together at the table. If you are keeping the children at the table, and keeping them focused on the task of dining, they will have few chances to misbehave.

When young children put their hands in their food, they are not misbehaving. Children younger them 18 months will probably eat with their fingers, and even older children will often explore food with their hands. This is normal and acceptable. In fact, if children are allowed to touch foods, they are more likely to taste them.

At around 2 or 2 1/2 children will begin to understand your instructions not to put their fingers or hands in serving bowls or in other people's food. It is very important to teach children, beginning at a very early age, to wash their hands before every snack and meal. Not washing their hands, especially if they touch their food before it goes into their mouths, could make them ill. (There will be more about this in Chapter 5.)

The Responsibility of the Child

The child decides whether he or she eats and how much he or she eats.

Many providers have a difficult time giving children responsibility for whether they eat and how much they eat. We worry that some children do not eat enough and that other children eat too much. However, withholding food from a child or encouraging a child to eat more just interferes with the child's ability to regulate his or her own eating.

Resist the impulse to interfere in children's decisions about eating . Perhaps the child that suddenly eats less is not growing as rapidly as before. The child who seems to eat a lot may not be getting enough at home. There could be a variety of reasons for a child's eating behavior. Your interfering could actually make matters worse. Let your major concern be providing children with nutritious food choices and helping children develop healthy eating habits and attitudes about food.

There are rare times when you should be concerned about whether or not a child is eating or how much a child is eating. If you have a child who consistently does not eat well, ask the parent(s) how the child eats at home. If the child also eats poorly at home, recommend that the parent take the child to see a health care provider. Do not try to solve the problem yourself. Poor eating could be the result of a physical problem. Your attempts at getting the child to eat could do more harm than good.

A Reminder

A large piece of any food may cause choking for children who can not yet chew. The foods listed below are especially dangerous. Do not serve these foods until after the 2 year molars have appeared and the child is chewing on them.

- Hot Dogs
- Grapes
- Seeds
- Peanut Butter
- Pickles
- Olives
- Nuts
- Hard Candy
- Olives
- Corn
- Popcorn
- Nuts
- Thick, sticky cheese foods
- Raisins
- Raw Vegetables (Including Carrots and Celery)
- Hard Fruits or Fruits With Seeds

Some of these foods can be mdoified to reduce the risk of choking.
Refer to the information on page 9 or
call your CACFP sponsor if you have a question.

Family Style Dining

PRIMARY INFORMATION

What Every Family Child Care Provider Should Know

Family style dining, where the family gathers together at the table for a meal and quiet conversation, is certainly not a new concept. In fact, it is the way many of us grew up eating. Unfortunately, for many young families this style of dining is a thing of the past. Hectic schedules and busy life-styles make gathering everyone together for a meal almost impossible. Instead, many families seem to eat in shifts and on the run.

As you know, meal time for children is much more than a time for satisfying nutrient and calorie requirements. It is a time of comfort and learning. Young children not only develop eating skills and habits and learn about food and nutrition, but they also develop socialization skills and learn about themselves and others. This learning takes place best in the relaxed, social atmosphere created by family style dining.

The principles of family style dining are:

1. **Involve the children in preparing the meal and/or setting the table, and cleaning up afterwards.** Letting children contribute in ways that are meaningful builds their self-esteem. It is also a good way to teach them things like the names of utensils, how to count, and right versus left, and help them to develop motor skills and coordination. (You'll find more ideas about ways children can help in Chapter 4.)
2. **Gather everyone at the table, and join them yourself. Model good table manners and healthy eating habits. Eat the same foods that they eat. Be sure you at least try all of the foods. The children are watching** you and are more apt to do what you do than what you say. Encourage quiet conversation. Use the opportunity to talk with children about the foods they are eating.
3. **Create a comfortable place for children to eat and to learn. Use child-sized tables, chairs, serving containers, utensils, pitchers etc.**
4. **Place the food in serving containers on the table. To the extent that children are developmentally ready, let them pass the containers and serve themselves.** Some children may need your help, but restrain yourself from helping when it is not really necessary. Expect children to be awkward, slow, and somewhat messy until they have developed the coordination and skills needed to use utensils and pass food containers. (The chart on page 16 will help you to know what to expect from children at different ages. There are also suggestions on page 14 for ways you can help children be successful with family style meal service.) **Do not put foods hot enough to burn children on the table.**

5. **Offer all of the foods, including a nutritious dessert, at the same time.** Do not save dessert until last. This recommendation often surprises providers and parents. They immediately think that children will only eat dessert. However, research shows that over time children will choose foods that provide them with nutrients and calories they need. If you have gotten the children accustomed to dessert coming last, and only after they have finished the other foods on their plate, then it will take them a while to learn that dessert foods are not so special anymore. Holding dessert back as a treat teaches children that some foods are better than others, and that dessert is something special. If you offer children dessert at the same time you offer them other foods, they may eat it first, but they will learn not to attach special meaning to it. Some children will still like the dessert foods better than their vegetables, but dessert foods will be just one part of the meal. **Remember, your responsibility is to provide children with nutritious foods to choose from. The choice of what and how much to eat is theirs.**

6. **Create a relaxed atmosphere and keep eating at a leisurely pace.** Engage the children in quiet conversation . Keep them focused on the meal, but don't rush them.

7. **Be patient. Eating neatly takes a lot of skill. Children will have accidents.** Don't call too much attention to the accident. Simply help the children clean up the mess if they need it and continue with the meal.

Help children be successful at serving themselves and passing foods.

Scooping or spooning is easier for children when:
- Spoons are deep and not too large.
- They are scooping from a container with high sides so that they have something to push against.
- The container they are scooping from is placed at a comfortable distance.
- The food is not too hot.
- The food is more solid than liquid. (If children are serving foods like stew or soup, try letting them scoop it with a plastic cup with a handle. Ladles are difficult for children to use.

Pouring is easier for children when:
- They are pouring from a small, clear, plastic pitcher that is less than half full.
- They are sitting in a comfortable, stable position.
- They try to fill their cup or glass no more than half full.

Passing food containers is easier for children when:
- Containers are not too hot, too large, too heavy, or too full.
- They are encouraged to use both hands.
- They pick up the container from the table rather than taking it from another child's hands.

Cleaning up messes is easier for children when:
- They are using a sponge rather than a cloth.
- They are not made to feel bad for making the mess in the first place.
- They get help if they need it.

How do you meet the Child and Adult Care Food Program requirement for serving size when you allow children to serve themselves?

When a children are too young to fully participate in family style meal service, you can put the required serving size of each meal component on their plates. But once they begin to participate in family style meal service, they control thei serving size. They may serve themselves more than the CACFP required serving, less than the required serving, or choose not to serve themselves any of a food at all. It is the child's decision which foods to choose and how much to take from the selection of nutritious foods you offer.

The CACFP component requirements are still very important. They are established to provide a well balanced diet that provides children with all of the nutrients and calories they need. In addition, you are required to meet these requirements for reimbursement.

If a child chooses not to take any of a particular food, do not pressure her. Resist the impulse to say things like "Just try one bite." However, do not take the food off your menus because a child chooses not to serve him or herself any. The more familiar children become with a food, the more likely they are to eat it. Next time they may try it, and eventually they may like it, and soon they may choose to eat the required serving size. Try cooking the food a different way, or in the case of vegetables, serving it raw and with a dip.

If a child continues to refuse a food after it has been offered several times, replace it in your menus with other food items that meets the CACFP component requirements. Try to replace it with a food that provides similar nutrients. For example, if you serve spinach and children continually refuse it, look for another green leafy vegetable to serve instead. Try broccoli or turnip greens. Children's taste do change however, so don't eliminate spinach forever. Give it another try in a few months.

If you have child who continues to refuse all of the foods that fit one of the component requirements, like vegetables for example, consider planning a special activity that might interest the child in the food and encourage him/her to try it. With vegetables for example, consider a field trip to a garden or a farmer's market. (There are more ideas in Chapter 4.)

If children take less than the required amount of a food item, wait until they have eaten what they put on their plate and offer them a second serving. Let them decide if they want the second serving and how big that second serving should be.

Remember: Never bribe, threaten, or trick children into eating. Mealtime is not only about children getting nutrients and calories, it is also about children developing a positive attitude about food and mealtime.

The Development of Mealtime Behavior

This chart provides information on children's appetites, food preferences, independence and ability to participate in family style dining. It covers children from age 1 to age 3. Remember that these are just general guidelines. Do not expect all of your children to fit these descriptions exactly.

1 Year Old

Appetite:

May not eat equally well at all meals.

Refusals and Preferences:

May refuse milk from a bottle especially if new nipple style or some other change has been made. Favorite bottle is the evening one. Food preferences are becoming well-defined; usually show a preference for certain cereals and vegetables.

Independence and Ability to Participate in Family Style Dining:

May finger feed part of meal. A few refuse any help. Many insist on standing to eat. May need toy or two to hold if being fed. Some children this age can begin to sit in a three-sided chair. Whether in a three-sided chair or high chair, pull them up to the dining table to join the other children. Expect children this age to be very messy eaters. Be prepared with patience and lots of paper towels.

18 Months Old

Appetite:

May be decreasing. Usually less than that of vigorous infant. Appetite usually best for noon meal.

Refusals and Preferences:

Changes a lot.

Independence and Ability to Participate in Family Style Dining:

Enjoys feeding self. May do so for all of the meals with some help in filling spoon. Definitely should join the other children at the dining table, preferably sitting in a three-sided chair. May want to eat off other's plates or out of serving bowl. If there is room at the table, seat the 18 month old so that other children' plates are out of his/her reach. Should be an increase in the amount of time they spend at the table. May be able to pass some foods with your help. Should be able to give you the empty dish when finished.

2 Years Old

Appetite:

Fair to moderately good. Noon meal usually best.

Refusals and Preferences:

Two year olds typically show a sharp decrease in appetite as their rate of growth is slower than the first year. They may become discouraged by large servings. Many are fussy, hard to please or go on food jags or refusals. Can name foods and likes and dislikes. Don't like strained foods or foods mixed together. Like whole pieces of foods. May like certain tastes, shapes, feels, colors, especially red or yellow.

Independence and Ability to Participate in Family Style Dining:

Most two year olds are ready to sit at the table in regular chairs. They are learning to manipulate serving spoons and pour from small pitchers with assistance. They can begin to serve themselves and some of them may be able to pass bowls or plates of foods. Some 2 year olds can feed themselves without help and may not want anyone near by. Others may need help. There tends to be two extreme groups of eaters: messy and neat. Children this age can scrape leftover food off their plates into the garbage and put their dirty plates, silverware, and cups in the appropriate places. They can usually clean up their own spills.

2 1/2 Years Old

Appetite:

Often varies between very good and very poor. Usually eats one good meal - noon or evening.

Refusals and Preferences:

More defined than at 2 years of age. Food jags continue. (You will read more about food jags on page 20.) May favor meat, fruit, butter. Feeds self preferred foods. Eats other foods if fed. Totally refuses to eat disliked foods, especially green vegetables. (This does not mean you should stop offering green vegetables. Eventually a child may try them and like them.)

Independence and Ability to Participate in Family Style Dining:

May feed self entire meal or want to eat some and ask for help with the rest. Likes routines. Demands same foods, dishes, or arrangement of dishes. Children this age can pass foods and are becoming good at manipulating serving spoons.

3 Years Old

Appetite:

Fairly good. Improved appetite from age 2. Less changeable than before. Milk intake may be increasing.

Refusals and Preferences:

Less defined than earlier. Meat, fruit, milk, dessert, sweets favored but also eats vegetables. Likes foods that need chewing. May ask for special foods as meal is prepared. Fluctuating tastes may appear at this age.

Independence and Ability to Participate in Family Style Dining:

Feeds self. Eats well. Demands for attention while eating may be excessive. Begins to master pouring and mastering serving utensils and can scoop and balance. Understands the concept of quantity better (as in the command "just take one"). Begins to understand the concept of sharing and can pass foods.

4 and 5 Years Old

When children reach this age they have mastered the mechanics of eating and have learned the skills needed to participate fully in family style dining. They are usually more interested in colors, textures, and tastes of foods and may be more willing to try new foods. They are also beginning to develop very individual tastes and food preferences. Children this age love to be helpful. Give them specific duties.

Special Issue: Introducing Children to New Foods

Young children are not too adventurous when it comes to trying new foods. Research shows that sometimes children have to be offered a food 8 to 10 times before they feel comfortable enough to try it. This can be a frustrating experience for both parents and providers. Preparing foods, only to have children refuse to eat them, can feel like a waste of both time and money.

It might be best to consider foods offered to and rejected by children as an investment. And like most investments, given time, it may eventually pay off. In preparing a new food that a child refuses to eat, you have at least exposed the child to the food. Perhaps the next time they are offered the food, or maybe the time after that, your investment will pay of. The child may try the food and like it. **Here are some things that you can do to help children accept new foods.**

- **Introduce only one new food at a time.**
- **Serve the new food with familiar foods.**
- **If you are serving the child (if the child is too young to serve him/herself), serve only small amounts of the new food.**
- **Introduce new foods only when children are hungry.**
- **Talk about the new food- it's taste, color, texture etc.**
- **Let the children see you eating and enjoying the new food.**
- **Encourage children to taste the new food. If they reject it, accept the refusal and try again in a few weeks.**
- **Find out what is not liked about the new food. It may be something you can change, like the way the food is prepared. Sometimes a child will refuse a food cooked one way, but like it cooked another way.**

In spite of the frustration you may sometimes feel, it is very important that you continue to introduce children to new foods and to offer them foods they reject. If you do not, children may not have the variety they need in their diets for proper growth and development. In addition, they will be robbed of the opportunity to experience new tastes and textures and to add new foods to their diet.

Source: Healthy Young Children: A Manual For Programs. Abbey Shapiro Kendrick, Roxane Kaufmann, and Katherine P. Messenger (Eds.), 1988, National Association for the Education of Young Children, Washington, D.C.

Special Issue:
Common Challenges in Feeding Children

There are many challenges when it comes to feeding children. Fortunately, when we see a healthy, happy child eating well and enjoying it, we realize there are also many rewards. Below are some of the major challenges. In some cases, we offer helpful suggestions. In other cases, we simply advise patience.

Child Has A Small Appetite

Children have days when they eat a lot and days when they eat only a little. This is because children do not grow at a constant rate. They grow in spurts. During a growth spurt they typically eat more. When the growth spurt ends, their appetites naturally decrease. In addition to day to day changes in appetite, most children's appetites decrease at about age 1. At this age the growth rate usually decreases, so it is natural for the appetite to lessen. If you are feeding a child with a small appetite, do not try to force or trick him or her into eating. There is probably a good reason for the decrease in appetite. Instead, make sure the foods you offer are nutritious ones so that the calories children do consume will give them the vitamins and minerals they need.

Child Consistently Refuses to Eat

A child who consistently refuses to eat may have a serious physical or emotional problem . Don' t try to force or bribe the child to eat. You could actually make things worse. Recommend that parents take the child to see a health professional.

Child Will Not Eat Vegetables

Vegetables seem to have a bad reputation among children. In part this may be because many people do not expect children to like vegetables. Therefore they do not offer many vegetable choices. In truth, vegetables may take a little more effort than a hot dog. But a healthy child is worth it.

Give children a real chance to like vegetables. Try preparing vegetables in different ways. Many children prefer them steamed lightly so that they retain their bright colors and their texture. Try offering raw vegetables with dip for the afternoon snack. (Make sure children are old enough to safely chew and swallow raw vegetables. Do not give raw vegetables to children under two.) Give children the opportunity to learn about vegetables and to become comfortable with them. Let them select vegetables at the store. Let them help you prepare the vegetables. Most children can do things like tear lettuce, snap fresh green beans or wash vegetables for you. They can also arrange cut vegetables on a snack tray. Talk with children about vegetables. Use vegetables to teach them to count and to teach them their colors . Use vegetables to teach shapes and concepts like big and small. Try taking children on a field trip to a garden so that they can see vegetables growing. The more you expose children to vegetables, the bigger the chance they will like them.

Child Goes on Food Jags Demanding the Same Food Over and Over

Food jags are common among preschoolers. Often these periods of demanding the same food over and over are an expression of a preschooler's independence. If you stay calm and treat them casually, they usually pass relatively quickly. As long as the food the child is demanding is not just empty calories- (high in sugar with little nutritional value) - be patient until the food jag passes.

Child Has Food Rituals

Many 2-4 year old children develop food rituals. They may be rituals such as always eating foods in a particular order, or eating from a particular bowl or plate, or even wearing a bib in a certain way. Be patient. The child is being exposed to a world of new things. Food rituals can often help them to feel more secure. Let them follow their ritual until they decide to give it up.

Child Has Food Likes and Dislikes

We all have our food likes and dislikes. Children are no different. However, while you need to respect their likes and dislikes, you need also to recognize that children's food preferences are still developing . Many children will automatically dislike a new food. This does not mean you should assume they will never like it and therefore stop serving it. Wait a week or so and try the food again. You might also try preparing the food item differently. If after many tries the child still chooses not to eat the food, respect the child's decision. Try substituting another food from the same food group. Let a few months pass and then try again.

Child Has Trouble Chewing or Swallowing

If child has trouble chewing or swallowing food it may mean that the child is not developmentally ready to eat solid foods. Remember that not all children develop at the same rate. Difficulty swallowing or chewing might also be an indication of a physical problem. Don' t ever force or bribe the child to eat. You could actually harm the child. Recommend that parents take the child to see a health care professional.

A Child is Not Able to Hold Utensils or Cups The Way The Other Children Can

All children develop at their own pace. Developmental milestones are meant as general guidelines, not as hard and fast rules. If you have a child who seems slower to develop coordination and motor skills than the other children, do not call attention to the delay. Praise that child for his or her individual accomplishments and efforts. This child may catch up and eventually even surpass the other children developmentally. However, if you feel there is real cause for concern, suggest that the parents take the child to see a health care professional.

Child Has a Food Allergy or Food Intolerance

Food allergies are relatively common among infants and young children. Symptoms of allergic reactions include diarrhea, vomiting, abdominal pain, rash, irritability, breathing problems, and even death. These reactions may occur immediately after the food is eaten or hours later. Foods that commonly cause allergic reactions include nuts, peanuts, eggs, cow's milk protein, wheat, fish, shellfish, and citrus fruits. To prevent the reaction, one must avoid eating the foods they are allergic to. If you have a child who is allergic to a food, the child's parent should provide you with written information from a health care provider about what the child can and can not eat. In most cases you can substitute another food item in that same food group of the food the child is allergic to.

A food intolerance results from the absence of some chemical or enzyme needed to digest a particular food. A child with a food intolerance may suffer from abdominal pain, bloating, and diarrhea. Unlike food allergies, a child with a food intolerances does not necessarily have to avoid the food. Sometimes the food can be altered in such a way that the child can digest it.

The most common food intolerance results from the inability digest the sugar or lactose in milk. This is referred to as a **lactose intolerance.** Lactose intolerance is very common among Africans, Black Americans, Asian Americans, Jews, Arabs, and Native Americans from both North and South America. Some children can not tolerate any amount of lactose, while others can tolerate lactose in small amounts in foods spaced throughout the day.

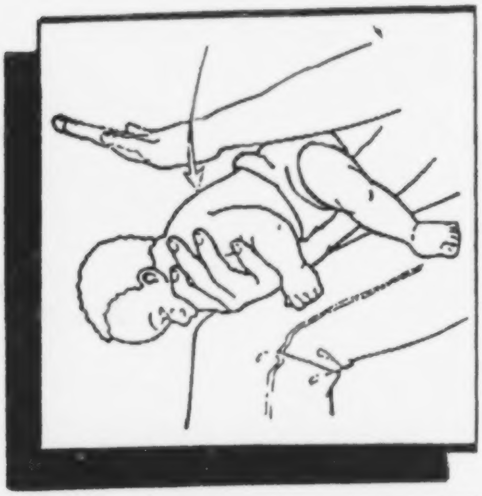
Children who have lactose intolerance may have a difficult time getting the calcium they need. As a result, the health care provider might suggest a milk substitute or additive. There is a commercial milk product on the market that has been modified so that children with lactose intolerance can digest it. It is referred to as hydrolyzed milk. You can also purchase an additive which you can add to regular milk to make it digestible to children with lactose intolerance. This additive is the enzyme lactase, sold over the counter as Lact-aid. There are also lactose-free soy-based formulas which can be used as substitutes for infant formula or cow's milk.

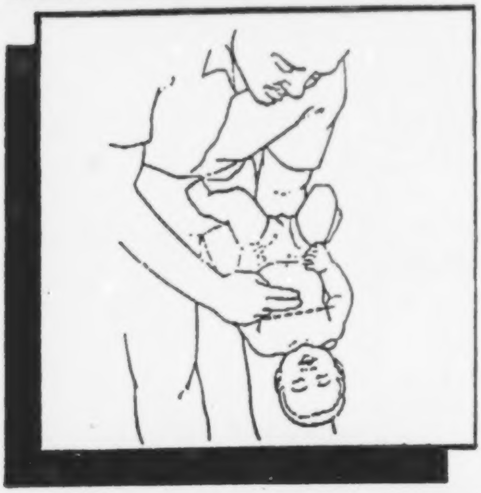
As always, follow the health care providers recommendations regarding the diets of children with food allergies, or lactose and other food intolerances. Do not try any of the alternatives listed above unless you have been instructed so by a health care provider. (From Healthy Young Children: A Manual For Programs, Abby Shapiro Kendrick, Roxane Kaufman, and Katherine P. Messenger (Editors), 1988, National Association for The Education of Young Children: Washington, D.C.)

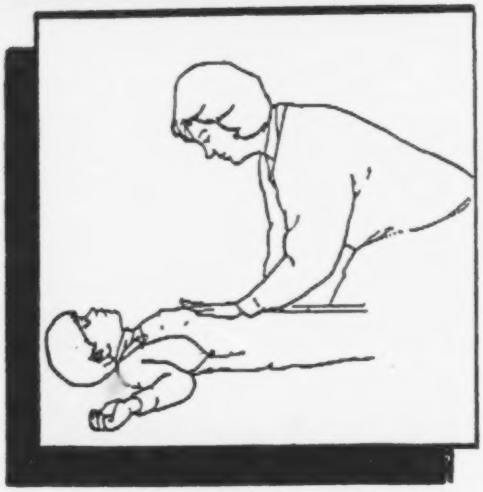
Child Eats Too Much or is Overweight

Occasionally a parent will ask a provider to restrict the diet of their overweight child. However, obesity could result from something other than the child's food intake. Research shows that in most cases obesity among children is related more to a lack of physical activity. Even if a child does overeat, overeating may be an indication of family and/or emotional problems that you as a provider are not equipped to handle. Suggest to the parent that they consult a health care provider. **Never restrict a child's food intake unless instructed to by a health care provider. Instead, give children nutritious food choices and plenty of opportunities for physical exercise.**

Special Issue: What You Can Do When A Child Is Choking







(Source: The American Red Cross.)

If a child is choking but CAN BREATHE:
Call the rescue squad (911) and until help comes:

- Keep the child calm.
- Have the child sit down and cough.
- Do not slap the child on the back.
- Do not give the child a drink.
- Do not hold the child upside down.

If a child is choking but CANNOT BREATHE, COUGH, SPEAK, OR CRY, Call the rescue squad (911) and until help comes:

For an infant who is conscious: (see picture #1)

1. Place the infant face down on your arm, supported by your thigh, and tilt the head towards the floor.
2. Give 4 back blows between the shoulder blades with the heel of your hand.

If the object does not come out: (see picture #2)

3. Sandwich the infant between your forearms and hands, and turn the infant on its back. Place your arm on your thigh for support, tilting the infant's head towards the floor.
4. Place two fingers on the infant's chest one finger's width below an imaginary line running between the infant's nipples. If you feel the notch at the end of the ribs you are too low and should move your fingers up slightly. ***Do not push on the lower stomach of an infant.***
5. Press 4 times on infant's chest.
6. Repeat if necessary.

For a young child who is conscious: (see picture #3.)

1. Lay the child on the floor on its back. Kneel at the child's feet.
2. Place the heel of your hand on the child's stomach, just above the navel and well below the rib cage. Do not press your fingers on the child's ribs.
3. Press rapidly in and up 6 to 10 times.
4. Repeat if necessary.

For an infant or young child who becomes unconscious:

1. Open the mouth and look for the object. If you can see it, remove it by doing a finger sweep with your little finger.
2. Give two slow breaths to the infant or young child.
3. Repeat the steps given above for a conscious infant or young child if necessary.

The infant or young child needs to see a doctor, even when breathing returns.

Every provider should learn how to respond when a child is choking. Call your local American Red Cross chapter for more information and for first aid training.

CHAPTER 2

UNDERSTANDING THE DIETARY GUIDELINES

INTRODUCTION. . .

In the Introduction you will read about:

nutrition: one part of a healthy childhood	page 2
good nutrition: not just for children	page 2
the dietary guidelines	page 3
the food guide pyramid	page 4
adult serving sizes	page 6
Child and Adult Care Food Program food chart	page 7

This manual was made possible by an educational grant from Nestle USA, Inc. to Save The Children Child Care Support Center.

Nutrition: One Part of a Healthy Childhood

Childhood is a time of rapid growth and development. During this time children need lots of nutrients. **Nutrients include the vitamins, minerals, carbohydrates, protein, fat, and water that we get from the foods we eat.** Children also need to get the right amount of calories, the energy we get from the foods we eat. But children can only eat so much. This makes it very important that the food choices children receive be healthy choices, choices that provide them with all of the right nutrients and plenty of calories.

> **Good nutrition means eating the right amounts of the right combinations of healthy foods.**

Here are some of the reasons why good nutrition is important.

1. **Good nutrition helps children feel good and look good.**
2. **Good nutrition gives children the energy to grow, learn and play.**
3. **Good nutrition prevents some diseases and makes children more resistant to others. Six out of the 10 major diseases in the United States, such as heart disease and high blood pressure, are diet related.**
4. **Good nutrition helps to prevent dental problems.**
5. **Good nutrition provides for the proper growth and repair of body tissue.**
6. **Healthy eating habits learned and practiced in childhood can form the basis of a lifetime of good health.**

The role of family child care providers in making sure children learn healthy eating habits and get the nutrition they need is perhaps more important now than ever before. Today most parents work outside the home. They often find themselves too tired at the end of the day, and often in too big a hurry in the mornings, to prepare nutritious meals as they might like. Fast food chains and pre-packaged dinners, not always the most nutritious foods, are easy to serve and often take the place of home cooked meals.

> **Whether or not some children get enough of the nutritious foods they need may depend on what you offer them in the family child care home.**

Good Nutrition: Not Just For Children

Although the major focus of this training material is on providing nutritious meals and snacks for the children in your care, good nutrition is really for everyone. The information provided in these chapters applies just as much to you and your family as it does to the children in your care. The information we present is **based on the dietary guidelines issued by the United States Department of Agriculture and the United States Department of Health and Human Services.** These dietary guidelines were actually written for adults. However, we found that they could also be used in developing general guidelines for feeding children. **In a few cases our dietary recommendations for children are somewhat different from the dietary guidelines for adults.** For example, children under two need more fat than older children and adults. In these cases we have been careful to note the differences.

In explaining these dietary guidelines and teaching you how to apply them, we sometimes refer to the way you eat and sometimes refer to the foods you offer children. This is because we understand that the two are related. We know that many of you serve the same foods to your families as you serve to the children in your care. Some of you cook large evening meals so that you have enough left for the children's lunch the next day. Others may cook large lunches so that you have enough for your family's evening meal. Even if you do cook different meals for your family than you serve to the children in your care, the way you cook is probably basically the same. In other words, if you often fry foods for your family, you probably fry foods for the children. Similarly, when you shop, you are probably buying for yourself and your family, as well as for the children in your care. No doubt you have come up with several ways to manage food shopping and preparation that save you time and money while providing meals and snacks for everyone eating in your home.

We hope that you will use the information we provide not only to prepare more nutritious meals and snacks for the children, but to prepare more nutritious meals and snacks for yourself and your family. Good nutrition is in everyone' s best interest.

We Could All Use A Refresher Course In Nutrition

There have been many changes recently in what we know about nutrition.

- We have discovered that many of the foods we have eaten in the past are not that good for us and should not be eaten as often or in such large quantities. For example, researchers have found relationships between sodium and hypertension, fat and heart disease, and fat and cancer.

- We have discovered that some of the nutrients we get from foods have benefits not previously recognized. For example, fiber may reduce a person's risk of getting some forms of cancer, and adequate calcium in the diet may prevent osteoporosis.

- Often it is the way we prepare the food, and not the food itself, that makes it a healthy choice or a not- so -healthy choice. As we become introduced to new foods we learn new recipes and new ways to prepare foods, including more healthy ways to prepare some of our old favorites.

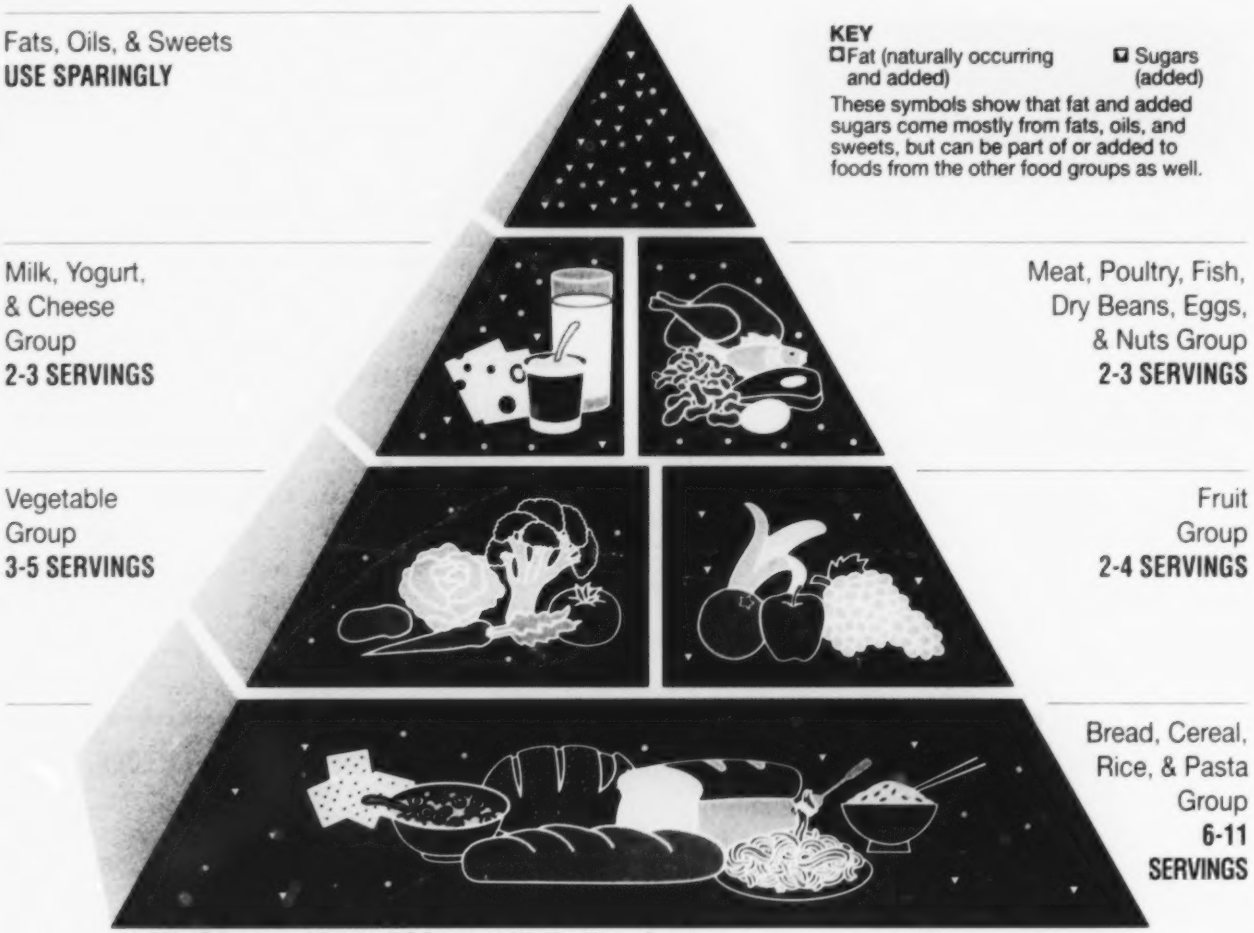
All of this may seem a little overwhelming, but it is much simpler than it seems. The changes in what we should eat are summed up in the following dietary guidelines developed by the United States Department of Agriculture and the United States Department of Health and Human Services.

1. **Eat a variety of foods.**
2. **Maintain a healthy weight.**
3. **Choose a diet low in fat, saturated fat, and cholesterol. (This does NOT apply to children 2 years old or younger. Read why on page 41.)**
4. **Choose a diet with plenty of vegetables, fruits, and grain products so that you get adequate starch and fiber.**
5. **Avoid too much sugar.**
6. **Avoid too much salt and sodium.**

These dietary guidelines were used to construct the Food Guide Pyramid presented on the following page. This Pyramid shows the relative amounts of food we need from each of the 5 food groups. It will be used throughout this chapter in explaining each of the dietary guidelines.

Food Guide Pyramid

A Guide to Daily Food Choices


Fats, Oils, & Sweets
USE SPARINGLY
Milk, Yogurt, & Cheese Group
2-3 SERVINGS
Meat, Poultry, Fish, Dry Beans, Eggs, & Nuts Group
2-3 SERVINGS
Vegetable Group
3-5 SERVINGS
Fruit Group
2-4 SERVINGS
Bread, Cereal, Rice, & Pasta Group
6-11 SERVINGS

KEY
☐ Fat (naturally occurring and added) ▣ Sugars (added)

These symbols show that fat and added sugars come mostly from fats, oils, and sweets, but can be part of or added to foods from the other food groups as well.

SOURCE: U.S. Department of Agriculture/U.S. Department of Health and Human Services

Use the Food Guide Pyramid to help you eat better every day. . .the Dietary Guidelines way. Start with plenty of Breads, Cereals, Rice, and Pasta; Vegetables; and Fruits. Add two to three servings from the Milk group and two to three servings from the Meat group.

Each of these food groups provides some, but not all, of the nutrients you need. No one food group is more important than another — for good health you need them all. Go easy on fats, oils, and sweets, the foods in the small tip of the Pyramid.

To order a copy of "The Food Guide Pyramid" booklet, send a $1.00 check or money order made out to the Superintendent of Documents to: Consumer Information Center, Department 159-Y, Pueblo, Colorado 81009.

U.S. Department of Agriculture, Human Nutrition Information Service, August 1992, Leaflet No. 572

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Reading The Food Guide Pyramid

- The smallest part of the pyramid is the tip. This area is labelled "fats, oils, sweets." Eat these foods sparingly. They are mostly calories and have very little real nutritional value.

- The second level of the pyramid is divided into two parts. On the left side are dairy products like milk, yogurt, and cheese. Eat 2-3 servings from this group each day. On the right side of the second level is the meats, poultry, fish, dry beans, eggs and nuts food group. Eat 2-3 servings from this group each day.

- Level 3 of the pyramid is also divided into two parts. The left side which represents vegetables is a little larger than the right side, the side representing fruits. Eat 3-5 servings of vegetables and 2-4 servings of fruit each day.

- The bottom level of the pyramid is the largest and shows the food group that should provide us with the biggest portion of our daily diet. This group is the grain products: bread, pasta, cereal, and rice. We should eat 6-11 servings from this group each day.

About Serving Size

The USDA suggests that everyone eat at least the smaller number of servings recommended for each of the food groups in the food pyramid. Adult serving sizes for each of the food groups is provided on page 6. Use this as a guide for healthy eating for adults.

Children need the same variety in their diets, but because children are smaller they may need smaller servings. They make up for the smaller serving in part by eating more often than adults. Remember, snacks are an important component in a child's diet. Without snacks, children may not get all of the calories and nutrients they need.

Use the Child and Adult Care Food Program Food Chart on page 7 to help you determine serving sizes for children. These are the minimum amounts that the Child and Adult Care FoodProgram requires you to offer children. You probably know better than anyone that while you may encourage a child to eat, the decision to eat or not to eat is ultimately made by the child. In addition, not only do different children eat different amounts, but each child will have times when he or she seems to eat a lot, and times when he or she seems to eat only a little. **Use serving sizes and the food pyramid as general guidelines for healthy eating.**

Adult Size Servings For The 5 Food Groups

Bread, Cereal, Rice, and Pasta

one adult size serving =
1 slice of bread
or
1 ounce of ready-to-eat cereal
or
1/2 cup of cooked cereal, rice, or pasta

Vegetable

one adult size serving =
1 cup of raw leafy vegetables
or
1/2 cup of other vegetables, cooked or chopped raw
or
3/4 cup of vegetable juice

Fruit

one adult size serving =
1 medium apple, banana, orange
or
1/2 cup of chopped, cooked, or canned fruit
or
3/4 cup of fruit juice

Milk, Yogurt, and Cheese

one adult size serving =
1 cup of milk or yogurt
(Remember: These are adult serving sizes. Children need 2 cups of milk a day.)
or
1-1/2 ounces of natural cheese
or
2 ounces of processed cheese

Meat, Poultry, Fish, Dry Beans, Eggs, and Nuts

one adult size serving =
2-3 ounces of cooked lean meat, poultry, or fish.
(1/2 cup of cooked dry beans, 1 large egg, or 2 tablespoons of peanut butter count as 1 ounce of meat.)

Child Care Food Program Food Chart

	Age 1 and 2	Age 3 through 5	Age 6 through12
Breakfast			
Fluid milk	1/2 cup	3/4 cup	1 cup
Juice or Fruit or Vegetable	1/4 cup	1/2 cup	1/2 cup
Bread or Bread Alternate	1/2 slice*	1/2 slice*	1 slice*
Snack			
(Supplement. Select 2 out of 4 components.)			
Fluid milk	1/2 cup	1/2 cup	1 cup
Juice or Fruit or Vegetable	1/2 cup	1/2 cup	3/4 cup
Meat or Meat Alternate	1/2 ounce**	1/2 ounce**	1 ounce**
Bread or Bread Alternate	1/2 slice*	1/2slice*	1 slice*
Lunch\Supper			
Fluid milk	1/2 cup	3/4 cup	1 cup
Milk or Poultry or Fish or	1 ounce	11/2 ounces	2 ounces
Cheese or	1 ounce	11/2 ounce	2 ounces
Egg or	1	1	1
Cooked Dry Beans or Peas or	1/4 cup	3/8 cup	1/2 cup
Peanut Butter orOther Nut or Seed Butters or	2 tbsp.	3 tbsp.	4 tbsp.
Nuts and/or Seeds	1/2 ounce***	3/4 ounce***	1 ounce***
Vegetable and/or Fruit (2 or more)	1/4 cup total	1/2 cup total	3/4 cup total
Bread or Bread Alternate	1/2 slice*	1/2 slice*	1 slice*

* or an equivalent serving of an acceptable bread alternate such as cornbread, biscuits, rolls, muffins, etc., made of whole-grain or enriched meal or flour, or a serving of whole-grain or enriched cereal, ora serving of cooked enriched or whole-grain rice or macaroni or other pasta product.

** Yogurt may be used as a meat/meat alternatein the snack only. You may serve 4 ounces (weight) or 1/2 cup (volume) of plain or sweetened and flavored yogurt to fulfill the equivalent of one ounce ofthe meat/meat alternate component. For younger children, 2 ounces (weight) or 1/4 cup (volume) may fulfill the equivalent of 1/2 ounce of the meat/meat alternate requirement.

*** No more than 1 ounce of nuts and/or seeds may be served in any one meal.

CAUTION: Children under the age of 5 years are at the highest risk of choking. USDA recommends that nuts and/or seeds be served ground or finely chopped in prepared food.

Source: U.S. Department of Agriculture, Food and Nutrition Service, Program Aid No. 1165, March 1980. Slightly revised July 1989.

Remember: Children need the same variety in their diets, but because children are smaller, they may need smaller servings. Children also need to eat more often than adults.

The Dietary Guidelines

What follows is an explanation of each of the 6 dietary guidelines.

1. Eat a Variety of Foods. page 9

2. Maintain a Healthy Weight . page 35

3. Avoid Too Much Fat, Saturated Fat and Cholesterol. page 39

4. Eat Plenty of Fruits and Vegetables so that You Get Adequate Starch and Fiber. page 59

5. Avoid Too Much Sugar. page 67

6. Avoid Too Much Salt and Sodium. page 83

68

1. EAT A VARIETY OF FOODS. . . .

In this section you will learn about:

choosing variety page 11

Helpful charts are provided on:

choosing a variety of vegetables page 13
choosing a variety of fruits page 14
choosing a variety of breads, grains and pastas page 15
the iron content of selected foods page 22

To learn more, read the supporting information:

the 10 key nutrients page 17
iron deficiency anemia page 21
combining foods for better nutrition page 23

There is also information on special issues :

vitamin supplements page 25
fortified foods page 26
vegetarian diets page 27

Choosing Variety

PRIMARY INFORMATION

What Every Family Child Care Provider Should Know

Serving a variety of foods is very important in assuring that children get the variety of nutrients and the calories they need. "Variety" not only means selecting foods from each of the 5 major food groups, but it means variety in your selection within groups. In order to get all of the nutrients our bodies need, we need variety in the foods we eat over a several day period.

Our bodies need about 50 different nutrients to stay healthy. Ten of these nutrients have been identified as key nutrients. This means that if we eat the foods that supply us with enough of these 10 nutrients, we can be fairly certain that we have enough of the other 40.

The 10 key nutrients are:

Calcium
Carbohydrates
Fat
Iron
Niacin
Protein
Vitamin A
Vitamin B1 (Thiamin)
Vitamin B2 (Riboflavin)
Vitamin C

We can get enough of these nutrients by eating a variety of foods. Selecting foods from each of the 5 major food groups will assure us we are getting a variety. **These 5 major food groups are:**

1. **Fruits:** Fruits are a good source of vitamin A, vitamin C, potassium and dietary fiber.

2. **Vegetables:** These foods provide us with vitamins A and C, minerals like iron and magnesium and dietary fiber.

3. **Breads, cereals, rice, pastas and other foods made from grains:** This food group provides protein, iron, vitamin B1 and niacin. It is also a good source of complex carbohydrates which supply us with energy.

4. **Milk, yogurt and cheese:** These foods are our best sources of calcium. They also provide vitamin B2, protein, fat, and other nutrients. Vitamins A and D are added to some brands of milk. These brands are labeled "**fortified.**" Because of these extra vitamins, **fortified milk is the best to buy.** ***All children being served by the USDA Child and Adult Care Food Program must have fluid milk every day. Yogurt and cheese cannot be served in place of milk.***

5. **Dry beans and dry peas, eggs, fish, poultry, and meat:** These foods are our major source of protein. They also contain vitamin B1, fat, niacin and iron.

Some foods are better sources of certain nutrients than others, and not all of the foods in one food group contain the exact same nutrients. So, for example, we cannot just rely on a couple of different vegetables to provide us with the many nutrients we need from vegetables. We need variety. For example, if you served corn as a vegetable on Monday, serve squash on Tuesday and spinach on Wednesday. Try to serve a new vegetable each day for 2 weeks. Can you do it?

The children will probably have their favorite foods from each food group, and you may feel tempted to serve these favorites over and over to please them. But this is not the best way to provide for their nutritional needs. It also robs children of the opportunity to try new foods and experience new tastes and textures. Remember, a child can dislike a food one week, but like it the next. And they can dislike it cooked one way, but like it cooked another. Refer back to the section on Introducing New Foods in Chapter 1 of this manual for information on getting children to try new foods.

Eating a variety of foods may be the most important of the dietary guidelines. If your meals reflect the eating pattern illustrated in the Food Guide Pyramid, if you are offering the right amounts of a variety of foods, you will have little problem meeting the other 5 dietary guidelines.

Choose A Variety of Vegetables.

Here Are Several Choices.

Artichoke
Asparagus
Avocado
Green Beans
Wax Beans
Lima Beans
Bean Sprouts
Beets
Belgian Endive
Black-eyed peas
Broccoli
Brussels Sprouts
Cabbage
Carrots
Cauliflower
Celery
Chick peas (Garbanzos)
Chives
Collard Greens
Corn
Cucumber
Eggplant
Curly Endive or Escarole
Kale
Kohlrabi

Lettuce
Mushrooms
Mustard Greens
Okra
Onions, (red, Bermuda, Spanish)
Parsley
Parsnips
Peas
Snow peas
Peppers
Potatoes
Pumpkins
Radishes
Spinach
Squash, (Straight neck, Yellow, Zucchini, Acorn, Butternut, Spaghetti, Summer, Winter)
Sweet Potatoes
Swiss Chard
Tomatoes
Turnips
Turnip Greens
Rutabagas
Water Chestnuts
Watercress

CAUTION: Be aware that young children can choke easily. To minimize choking, make sure the foods you serve are cut into pieces small enough to pass through a child's throat.

Choose A Variety of Fruits.

Here Are Several Choices.

- Apples
- Apricots
- Bananas
- Blackberries
- Blueberries
- Cantaloupe
- Casaba
- Cherries
- Coconut
- Cranberries
- Currants
- Figs
- Gooseberries
- Grapefruit
- Grapes (Red, White, Purple)
- Honeydew
- Honeyball
- Kiwifruit
- Kumquats
- Lemons
- Limes
- Mangoes
- Nectarines
- Orange
- Papayas
- Peaches
- Pears
- Persimmons
- Pineapple
- Plums (Red, purple)
- Prunes
- Pomegranate
- Rasberries
- Rhubarb
- Strawberries
- Tangerines
- Tangelo
- TempleOrange
- Watermelon

CAUTION: Be aware that young children can choke easily. To minimize choking, make sure the foods you serve are cut into pieces small enough to pass through a child's throat.

Choose A Variety of Breads, Grains, and Pastas.

Here Are Several Choices.

Breads:

- Bagels
- Corn muffins
- Crackers
- Croissants
- Dinner rolls
- English muffins
- Flat Bread
- French Bread
- Fruit muffins
- Fry Bread
- Hamburger bun
- Hotdog bun
- Hush Puppies
- Matzo Bread
- Oatmeal Bread
- Onion Roll
- Pancakes
- Pita Bread
- Pumpernickel Bread
- Soft Pretzels
- Raisin Bread
- Rye Bread
- Tortillas, (corn or flour)
- Waffles
- Wheat Bread
- Whole grain breads

Grains and Pastas:

- Barley
- Bulghur (Cracked Wheat)
- Cereals, (hot and cold)
- Egg noodles
- Hominy Grits
- Oatmeal
- Macaroni, (enriched)
- Millet
- Rotini Noodles (enriched)
- Spaghetti Noodles, (enriched)
- Spinach Noodles, (enriched)
- Rice, (white and brown)
- Rice Noodles
- Wheat Germ

CAUTION: Be aware that young children can choke easily. To minimize choking, make sure the foods you serve are cut into pieces small enough to pass through a child's throat.

The 10 Key Nutrients

Supporting Information

For The Provider Who Wants To Know More

CARBOHYDRATES:

- Carbohydrates are our major sources of energy.

- Carbohydrates are supplied by foods in three forms. These are starches, sugars, and cellulose or fiber. Starch (complex carbohydrates) and sugars (simple carbohydrates) provide energy and support activity and growth. Cellulose or fiber furnishes bulk. (Dietary Guideline #4 addresses the body's need for adequate fiber. For more information about fiber, see the Primary Information on page 63.)

- The major portion of our diet should come from foods that provide us with complex carbohydrates. Children especially need the calories (energy) from complex carbohydrates when the fat in their diet is limited.

- Some of the major sources of carbohydrates are potatoes, grains, breads, cereals, rice, pastas, vegetables, and fruits.

PROTEIN:

- Protein is necessary to life and growth. Protein helps to build and repair all body tissues like skin, bone, hair, blood and muscle.

- Although lack of protein can cause serious health problems, this is very uncommon in the United States. Most Americans get more protein than they really need.

- Proteins are made up of building blocks called amino acids. Nine of these amino acids, such as lysine and tryptophan, are essential for human beings and cannot be made by the body. We can only get them through the foods we eat.

- Proteins come from two major sources:
  1. animal proteins: meat, fish, eggs, milk and cheese.
  2. plant proteins: cereal, pasta, grain, breads, dry peas and dry beans.

- Proteins vary in quality based on the number and balance of the amino acids. In order for our body to fully use the protein, all 9 of the essential amino acids must be present in balanced proportions.

- Animal proteins contain all of the essential amino acids that make up protein. They are considered the highest quality protein. Your body can use them easier and get more from them than it can from plant proteins.

- Plant proteins do not contain all of the amino acids, the building blocks that make up protein. They are incomplete proteins unless they are combined in specific ways with other sources of plant proteins. For example, by combining peanut butter and bread, or beans and corn tortillas, you have a complete plant protein. (You can read more about combining foods in the Supporting Information on page 23.)

- In addition to protein, meats can be high in fat. Therefore, it important to learn how to combine plant proteins, like dry beans and grains, to create complete proteins and to serve these occasionally as low fat substitutes for meat protein.

FATS:

- Fats are our most concentrated sources of energy. Remember, in the nutrition field, energy means calories. There are more calories in fat than in the same amount of any other source of nutrients. In fact, fats have more than twice the calories, ounce for ounce, as proteins, starches, or sugars. They also take longer to digest, and give you that "full" feeling.

- Fats are vital nutrients. They are involved in the building of body tissues and support vital organs, such as the kidneys. Children, especially children under two, need more fat in their diets than adults.

- Fats are composed of fatty acids. There are three kinds of fatty acids; polyunsaturated, monounsaturated, and saturated. Vegetable fats, such as corn, cottonseed, safflower, sunflower seed, sesame seed and soybean oils are generally high in polyunsaturated fatty acids. Olive oil and peanut oil are rich in monounsaturated fatty acids. Animal products and coconut oil, cocoa butter, palm oil, and macadamia nuts are high in saturated fatty acids.

- Diets high in saturated fatty acids have been linked to high cholesterol levels, a major factor in coronary heart disease and other chronic diseases. (The section on Dietary Guideline # 3 beginning on page 39 provides information on lowering cholesterol.)

VITAMIN A:

- Vitamin A, also called retinol, is important for normal growth, for night vision, and in fighting infection.

- Good sources of vitamin A are dark green and deep yellow vegetables including bok choy, broccoli, carrots, greens and spinach, as well as sweet potatoes, tomatoes, peaches, watermelon, mango, and papaya.

- Vitamins A and C are the two vitamins most often lacking in American children's diets.

- You should choose at least one serving from high vitamin A foods every other day.

- Because excess vitamin A is toxic, vitamin A supplements may be dangerous. It is best to get your vitamin A from the foods you eat. Excess vitamin A will not be a concern if you eat a variety of foods.

VITAMIN C:

- Vitamin C, also called ascorbic acid, helps in building and repairing tissue, in keeping the body resistant to infection and in healing wounds. It also helps the body to make use of iron. (To learn more about this, see page 24.)

- Good sources of vitamin C are citrus fruits and most dark green vegetables. Asparagus, broccoli, brussels sprouts, cauliflower, sweet potatoes, sweet peppers, tomatoes, cantaloupes, oranges, grapefruits, honeydews, papayas, and strawberries are excellent sources.

- Vitamin C cannot be stored in the body and needs to be eaten every day.

VITAMIN B1:

- Vitamin B1, also called thiamin, helps us get energy from carbohydrates, promotes a normal appetite, and is important for a healthy nervous system.

- Whole grain or fortified cereals, liver, lean pork, yeast (used in making bread), raw nuts, and lentils are good sources of vitamin B1.

VITAMIN B2:

- Vitamin B2, also called riboflavin, helps us utilize energy and is important for healthy skin, eyes, and clear vision.

- Milk and dairy products, liver, and green leafy vegetables are all good sources of vitamin B2.

NIACIN:

- Niacin helps us utilize energy, and promotes healthy skin and nerves and a normal appetite. It also helps us with digestion.

- Whole grain or fortified cereals, peanuts, poultry, fish, liver, and meats are good sources of niacin.

CALCIUM:

- Calcium is vital to healthy bones and teeth. It also helps with blood clotting, muscle contraction and relaxation, and the functioning of nerves.

- Milk is the major source of calcium in the American diet.

- Cheese and other dairy products, lentils, beans, sardines, dried fruits, collards, kale, mustard and turnip greens are also good sources of calcium.

- At certain times in our lives our bodies need extra calcium. Children, teenagers, pregnant women, nursing mothers, and older persons have a greater need for calcium.

IRON:

- Iron is necessary for healthy blood. It aids in the use of energy and increases our resistance to infection.

- Iron-fortified cereals, prune juice, liver, dry beans and dry peas,some vegetables and red meat are good sources of iron.

- Lack of an adequate supply of iron leads to anemia (weak blood) and fatigue. (You can read more about this in the Primary Information on the next page.)

- Iron is especially important to young children and women.

- Iron deficiency is the single most common nutritional problem among infants and preschoolers.

Iron Deficiency Anemia

Supporting Information

For The Provider Who Wants To Know More

Iron deficiency anemia is the most common nutritional problem among infants and preschoolers, especially for those living in poverty. Children who are suffering from iron deficiency are often pale, listless, and irritable. They often have little energy or appetite and have frequent colds. There are **two major causes of iron deficiency.**

1. **Failure to eat enough iron-rich foods.** Iron-rich foods include red meats, fish, poultry, leafy green vegetables like spinach and mustard greens, raisins and prunes, iron-rich breads and cereals, dry beans and dry peas, and egg yolks. Some children fill up on extra servings of milk and then have little appetite for these iron rich foods. Make sure the young children in your care are not filling up on extra servings of milk and select iron-rich snacks to supplement the iron they get from meals.

2. **Failure of the body to absorb the iron.** Iron is one of the most difficult of all nutrients for the body to absorb. Iron from meat sources is easier to absorb than iron from non-meat sources.

However, you can increase the body's ability to use iron from non-meat sources by serving certain combinations of foods. In particular, **foods high in vitamin C increase the body's absorption of iron.** For example, serve a glass of orange juice (source of vitamin C) with iron fortified cereal (non-meat source of iron .) You can also increase the iron content of foods by cooking them in a cast iron skillet or pan.

See the Supporting Information on page 23 for more information on combining foods.

Other foods can decrease the body's ability to absorb iron. In particular, **foods and beverages containing caffeine decrease the body's ability to absorb iron.** Drinks containing caffeine, like tea and soft drinks, are not recommended for children. However, if you choose to drink beverages with caffeine and want to get the maximum use of the iron in your diet, **do not consume caffeine during the meal or up to one hour after the meal.**

NOTE: If you are enrolled in the Child and Adult Care Food Program, it is possible for you to meet the minimum requirements for foods offered and portion sizes, and still not provide children with adequate iron. The USDA is currently updating the requirements and intends to address this issue. Until then, make an effort to exceed the Child and Adult Care Food Program requirements by offering foods high in iron and encouraging extra servings.

Iron Content of Selected Foods

(A child between the ages of 1 and 6 needs 10 mg. of iron a day.)

Food	Amount	Iron (mg.)
Breads and cereals:		
Enriched or whole grain breads	1 slice	0.7
Noodles, spaghetti, etc.	1/2 cup	0.7
Iron-enriched cooked or dry cereals	1/2-3/4 cup	0.7

Multi-vitamin and iron supplement cereals . *Iron content varies. Check the label for the amount in the brand you serve.*

Food	Amount	Iron (mg.)
Fruits and Vegetables		
Prune juice	1/2 cup	4.5
Watermelon	1 slice	3
Spinach	1/2 cup cooked	2
Greens	1/2 cup cooked	2
Peas, mixed vegetables	1/2 cup	2
Prunes	5 medium	2
Dates	5 medium	1.5
Raisins	1/4 cup	1
Apple juice	1/2 cup	1
Banana	1 medium	1
Broccoli	1 stalk or 1/2 cup	1
Green Beans	1/2 cup	1
Potato, sweet or white, baked	1 medium	1
Strawberries	3/4 cup	1
Milk		
Whole, skim, 2% milk	1 cup	0.1
Meat and other protein:		
Beef, pork, lamb	3 ounces	2-3
Poultry	3 ounces	1.5
Beef or chicken liver	3 ounces	8.5
Calves liver	3 ounces	14
Pork liver	3 ounces	25
Clams	3 ounces	5
Oysters	3 ounces	13
Other fish, shellfish	3 ounces	1-1.5
Egg	1	1
Nuts, average	2 Tbsp.	1
Seeds (sunflower, squash pumpkin, average)	2 Tbsp.	2

Combining Foods For Better Nutrition

Supporting Information

For the Provider Who Wants To Know More

Another important reason for serving a variety of foods is that **when certain foods are combined with other foods, it can improve their nutritional value.** Here are two examples.

1. Combining Foods To Complete Proteins

Proteins from plant sources, like dried beans and peanut butter, are not really complete by themselves. Incomplete proteins do not meet our body's need for protein. In order to make these proteins complete, these foods need to be served with other foods.

The following combinations of foods create complete proteins.

Beans Served With Grains

Examples include:

- beans and cornbread
- beans and tortillas
- beans and rice
- pea soup and cornbread
- baked beans and whole wheat biscuits

Cheese Or Eggs Served With Beans

Examples include:

- pinto beans and cheese
- beans and eggs

Eggs Or Cheese Or Milk Served With Grains

Examples include:

- grilled cheese or egg sandwich on whole wheat bread
- spaghetti or other pasta and cheese
- oatmeal and milk
- toast and eggs
- rice pudding (contains rice, milk, and eggs)

Cheese Or Eggs Served With Dark Green Vegetables

Examples include:

- broccoli and cheese sauce
- spinach souffle (contains spinach and eggs)

2. Combining Foods To Make Iron Useable

Some vitamins and minerals work best with other vitamins and minerals. For example, although grains, cereals, and dried beans and peas and some vegetables contain iron, the iron is not in a form our bodies can easily use. But, if you serve these foods with a food high in vitamin C, the iron becomes usable.

The list on the left contains foods which are non-meat sources of iron. The foods which are the best sources are in bold print. The list on the right contains foods which are good sources of vitamin C. **Keep in mind that cooking destroys almost all of the vitamin C in food. Therefore, the amount of vitamin C these foods provide will be affected by if you cook them and how you cook them.** For example, the cabbage in cole slaw is a better source of vitamin C than steamed cabbage. The foods on the list which can be served raw, and therefore may be considered the best sources of vitamin C, are in bold print. Use these lists to help you develop menus which combine foods to take advantage of iron from non-meat sources.

Non-Meat Iron Sources

asparagus (canned)
beans- green, wax, lima (canned)
beets (canned)
broccoli
brussels sprouts
dark leafy green vegetables
(beet greens, chard,
collards, kale,
mustard greens,
parsley,
turnip greens)
parsnips
peas, green
potatoes (canned)
tomato juice, paste,
puree, sauce
tomatoes (canned)
vegetable juice (canned)
apricots (canned)
cherries (canned)
dried fruits (apples, figs
apricots, dates, peaches
prunes, raisins)
grapes (canned)
dried beans and peas
eggs
peanut butter
all enriched or whole grain
bread and bread alternatives.

Vitamin C Sources

asparagus
broccoli
brussels sprouts
cabbage
cauliflower
chili powder
collards
kale
okra
peppers, sweet
potatoes, white
spinach
sweet potatoes
tomatoes
tomato juice, paste,
puree
turnip greens
turnips
cantaloupe
grapefruit
grapefruit juice
oranges
orange juice
raspberries
strawberries
tangerines

Special Issue: Are Vitamin Supplements Necessary?

Most experts seem to agree that children seldom need vitamin supplements if they are offered a variety of foods. Children's nutritional needs do vary at different stages of growth. For example, children under two need more fat than children older than two. However, these needs can usually be met through the foods they consume. **There are a few exceptions, but these are better left to the determination of a health care provider.**

If you have a child who eats poorly on a regular basis, discuss the matter with the child's parent(s). There are many different reasons why a child might eat poorly. A poor appetite ccould be a sign of illness or could be the result of emotional turmoil. Refusal to eat could also be an indication of a physical problem. Eating might cause the child discomfort or pain. If a parent reports that the child eats poorly at home as well, you might suggest that they consult their health care provider to determine why the child eats poorly. The health care provider will determine whether or not a vitamin supplement is appropriate for the child.

Never give a child a vitamin supplement unless it has been prescribed by a health care provider. It is best for you to use your energy in providing good food choices. Not only are vitamin supplements rarely needed, but high dosages of some vitamins can be dangerous.

Although most adults do not need vitamin supplements, there are some exceptions. These are:

- **Women in their childbearing years** may need to take iron supplements to replace the iron lost through menstrual bleeding.

- **Women who are pregnant or who are breast feeding** need more of many nutrients. They should consult a health care provider for information about the right vitamin supplement.

- **Elderly people who eat relatively little food or are on certain medications** may need to take supplements on the advice of their health care provider.

Special Issue: "Fortified" Foods

What is meant by "fortified foods?"

"Fortified foods" are food products that have certain nutrients added to them during production. In some cases, food products are "fortified" in order to replace nutrients that were removed during processing. For example, refined grain products are put through a milling process that partially removes many of the vitamins and minerals. When some of these vitamins and minerals are put back into the product during production, the products are labelled "fortified."

In other cases, food products are fortified with vitamins that were not present in the foods originally. Milk is a good example. Vitamins A & D are not found naturally in milk. But because of the body's need for these nutrients, and the difficulty some people have in getting the required amount, the dairy industry has adopted the policy of adding them to milk. Some milk cartons will say "fortified with Vitamins A & D." Others may say "Vitamin A + D Milk." Other may simply include vitamins A & D in the list of ingredients.

If we eat fortified grain products, do we still need to include less refined or whole grain products in our diets?

Yes. Even though you may eat fortified grain products, you still need to eat some less refined or whole grain products. There are 2 major reasons for including less refined or whole grain products in your diet.

1. Fortifying refined products replaces some of the vitamin and minerals lost during processing, and in some cases may add more of a nutrient than was present in the original food. However, **even in "fortifying" the product, it is unlikely that all of the different vitamins and minerals taken out have been replaced.**

2. **Whole grain products supply the body with dietary fiber.** Dietary fiber is important in promoting normal bowel functioning and in preventing and treating constipation. Recent scientific studies suggest that fiber may play a role in preventing colon cancer and reducing cholesterol. (You will learn more about the importance of dietary fiber and how to increase your consumption in the section on dietary guideline #4.)

Special Issue: Vegetarian Diets

Vegetarianism is a widespread practice. In fact, a large part of the world's population subsists on vegetarian diets. In many parts of the world traditional religious and cultural beliefs promote a vegetarian diet. Vegetarianism has been practiced in American society among a small proportion of the population for a long time. Only within the second half of this century has there been an increase in the popularity of vegetarianism in the United States.

According to the National Academy of Sciences' Food and Nutrition Board, adults who are **vegetarians can be well nourished if they select their diets carefully and give attention to nutrients that may be lacking in vegetarian diets. However, there are studies that report nutrient deficiencies of certain vegetarian diets, especially among infants and young children.** In addition, adverse health effect from strict and unplanned vegetarian diets have been reported. For these reasons, it is important that vegetarians understand the principles necessary to practice safe and healthy vegetarianism.

Types of Vegetarian Diets

A vegetarian is a person who does not eat some or any foods of animal origin. A vegetarian primarily eats foods that come from plants. Such foods include grains, legumes, fruits and vegetables. Vegetarians have different dietary practices, but most can be categorized into one of the following groups.

- **Semi-vegetarians** eat plant foods, milk, mild products, eggs, and more or less limited amounts of seafood and poultry. Red meat usually is avoided.
- **Pesco-vegetarians** eat plant foods and fish but exclude red meats.
- **Pollo-vegetarians** eat plant foods and poultry but exclude red meats.
- **Lacto-ovo-vegetarians** eat plant foods, milk, milk products, but avoid eggs and flesh foods.
- **Ovo-vegetarians** eat plant foods and eggs, but avoid milk, milk products and flesh foods.
- **Total vegetarians**, also called vegans, eat plant foods only. No foods of animal origin are consumed.

Why People Become Vegetarians

Americans become vegetarians for a variety of reasons. People generally adopt vegetarian diets for one or more of the following reasons:

Health. Many people believe they will be healthier if they are vegetarians. Vegetarian diets tend to be lower in saturated fat, cholesterol and sodium than the typical American diet. Some studies have found that in some people these dietary characteristics are associated with reduced risk of heart disease and high blood pressure. Vegetarian diets tend to be high in fiber. Fiber is beneficial in the diet because it rapidly moves food through the intestinal tract. Hence, there may be less time for carcinogens (cancer-causing substances) to be absorbed into the body. However, the National Academy of Sciences reports that the caner/fiber link appears doubtful at this time.

Though there are positive health benefits of vegetarianism, studies have shown that vegetarians are not necessarily more healthy or less healthy than meat-eaters. Vegetarianism cannot prevent or cure disease and vegetarians should continue to seek necessary medical care.

Ecology. Individuals who turn to vegetarianism for ecological reasons feel that one way to combat world hunger is to eat lower on the food chain. These vegetarians feel the practice of growing food to feed animals is wasteful. Instead, many more people could be fed if crops were used to feed people rather than animals.

Economics. Economic reasons for vegetarianism focus on the fact that it generally is less expensive not to eat meat. It has been estimated that the cost of meat account for about one-third of the average food bill. Most plant foods are cheaper than animal foods. The expense of eating meat may limit the amount people eat.

Ethics. Ethical reasons for vegetarianism include philosophies such as nonviolence and reverence for life. Some people are opposed to killing animals for food. Thus, they abstain from eating meat, poultry and fish.

Religion. Some religious groups have traditionally been vegetarian. Several Indian religious groups include vegetarianism among their tenets of faith. In the United States Seventh Day Adventists are the largest traditional group following vegetarianism. Followers of this faith generally are lacto-ovo-vegetarians. Some vegetarians are members of new religious groups with diet-related taboos. Though these groups vary in beliefs and dietary habits, they tend to believe vegetarianism is a way of cleansing the body and promoting a proper spiritual balance.

Planning a Nutritious Vegetarian Diet

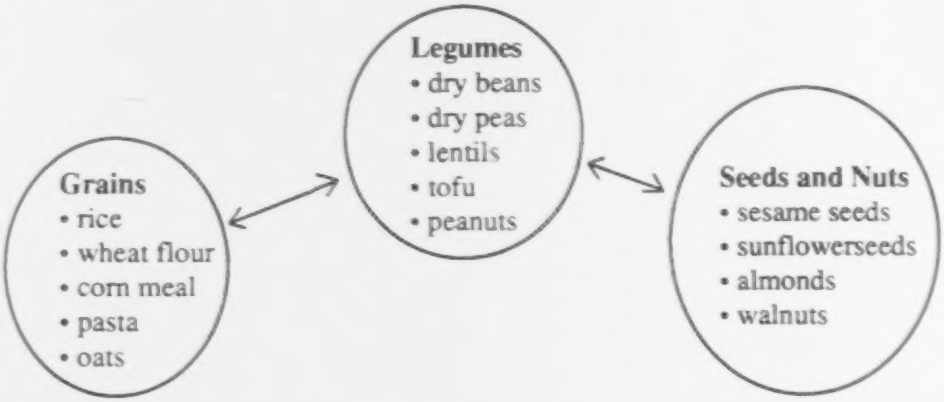
Individuals consuming vegetarian diets generally receive adequate amounts of most nutrients. The nutrients that may be low in vegetarian diets and that require special attention are protein, calories, riboflavin, vitamins B-12 and D, calcium and iron.

Protein is needed for growth and maintenance of body tissues. Protein also is necessary for enzymes, hormones, antibodies and milk production in women who are breast feeding. Protein is required throughout life. Each day protein must be supplied by the foods people eat.

Animal and plant foods supply protein, but the protein in plant foods is of a lower quality. Protein quality refers to the amino acid composition of a food. Amino acids are the building blocks that make up all proteins. The body needs a total of 20 amino acids to make protein. Twelve of the amino acids are non-essential amino acids. That is, the body can make these amino acids if they are not present in the foods a person eats. The other amino acids are essential. The body cannot make these amino acids; they must be obtained from food.

Animal foods, such as milk and meat, are complete proteins. This means they contain all nine of the indispensable amino acids needed for growth and good health. A person who eats foods of animal origin on a daily basis gets all of the indispensable amino acids. Plant foods, such as grains and legumes, are incomplete proteins. These foods lack one or more of the indispensable amino acids. For example, grains do not have enough of the amino acid lysine, and legumes lack methionine. Therefore, a vegan who relies only on plant foods for protein may not receive all of the indispensable amino acids.

A vegan can get all of the essential amino acids in one of two ways. First, two sources of plant protein, when eaten together, may supply all of the indispensable amino acids. This is called protein complementation. The following chart demonstrates how plant foods can be eaten in combination to supply all of the essential amino acids.



For example, when a peanut butter sandwich is eaten the bread supplies more of the methionine which the peanut butter is low in and the peanut butter supplies the lysine which the bread is low in. Some other complementary combinations are:

- rice-bean casserole
- corn tortillas and beans
- pea soup and rye bread
- baked beans and brown bread
- garbanzo beans and rice
- black-eyed peas and rice
- peanut butter on crackers
- lentil and rice soup
- sunflower seeds and peanuts
- sesame seeds in bean casserole
- bean burritos

The second way a vegan can get all of the essential amino acids is to use textured vegetable protein (TVP) and meat analogues. TVP is made from soybeans and is fortified with amino acids so it contains all of the essential amino acids. TVP is sold in a dehydrated form and must be reconstituted with water. TVP is used primarily in casseroles.

Meat analogues are meat-like foods made from vegetable protein, usually soybeans. Like TVP, meat analogues are fortified with amino acids so they are complete proteins. Meat analogues are purchased either canned or frozen and come in a variety of flavors, such as beef, chicken and bacon.

Energy is needed to sustain all body processes and also is needed for physical activity. The energy in food is measured in units called calories. Calories are supplied by fat, carbohydrate and protein in food. Vegetarians tend to consume fewer calories and to be thinner than meat eaters. This is because vegetarians eat plant foods that are bulky and low in calories.

Most vegetarians do not have difficulty in eating enough food to meet their energy needs. Children also will receive enough calories if they drink milk, eat milk products and eggs on a daily basis. However, because infants, young children and pregnant and lactating women have high needs for calories they may have difficulty consuming enough energy on a vegan diet. Protein also is a potential problem for these special groups. For this reason vegan diets are not recommended for these groups unless the diets are carefully planned and supervised by a registered dietitian or other qualified health professional.

Riboflavin (Vitamin B2) helps the body break down carbohydrates, proteins and fats so that they can be used for energy. Riboflavin also is necessary for healthy skin, eyes and clear vision. The best sources of riboflavin are liver, milk products and red meats. When these foods are restricted or avoided in the diet, riboflavin must come from such other sources as green leafy vegetables and fortified or enriched grains.

Vitamin B-12 is needed for normal red blood cell formation and normal nerve function. This vitamin is needed in the body in very small amounts and can be stored in the body in large amounts. Therefore, a deficiency of vitamin B-12 takes a long time to develop, maybe several years. Once a deficiency of the vitamin does develop, it results in irreversible nerve damage. Therefore, vegetarians need to give special attention to this nutrient.

At this time it is believed that vitamin B-12 is found only in animal foods. Foods of plant origin are not thought to contain any vitamin B-12. There are only three exceptions. Three different groups of foods may provide varying amounts of vitamin B-12. These are:

- fermented soybean products, such as tempeh, miso and natto.
- single cell proteins, such as microalgae and yeasts that are grown in a medium rich in vitamin B-12.
- sea vegetables, such as kelp, dulse, kombu and arame.

It is essential to remember that it is not known how much vitamin B-12 these foods contain. It may be a very small and insignificant amount. Therefore, these foods should not be relied upon for a single source of vitamin B-12.

Vegetarians who eat milk products and eggs on a daily basis will consume adequate amounts of vitamin B-12 in their diets. Vegans, however, will have little or no vitamin B-12 in their diets. They must obtain the vitamin through regular use of vitamin B-12 fortified soy milk or yeast or a vitamin B-12 supplement.

Vitamin D is required for the absorption of calcium from the digestive tract and for the incorporation of calcium into bones and teeth. Very few foods contain large amounts of vitamin D. The best sources -- fortified milk, egg yokes and liver -- are all of animal origin. Therefore, vegetarians, especially vegans, may not consume enough vitamin D.

A second source of vitamin D is sunlight. Sunlight on the skin enables the body to make vitamin D. A person who is regularly exposed to sunlight can get enough vitamin D without having any come from food. However, exposure to sunlight can be limited by several factors. Dark skin, pollution and northerly climates may decrease sunlight exposure and, therefore, vitamin D production. It is recommended that when exposure to sunlight is limited and a diet is devoid of animal products, that a vitamin D supplement be taken.

Calcium plays several roles in the body. It is needed for strong bones and teeth and for normal blood clotting. Calcium also is needed for normal muscle and nerve function. Most calcium in the American diet comes from milk and milk products. When these foods are avoided in the diet, calcium must come from other sources. Dark green leafy vegetables are the plant foods that provide the most calcium. It is often more difficult for people to eat dark green vegetables in sufficient quantities on a daily basis to meet the calcium needs. Careful menu planning becomes essential.

Iron combines with protein to form hemoglobin, the substance in the blood that carries oxygen and carbon dioxide. An adequate intake of iron is necessary to prevent anemia. Many Americans, both meat-eaters and vegetarians, have a difficult time consuming enough iron. Iron is found in animal and plant foods, however, the iron in animal foods is more easily absorbed by the body. Also, the iron in plant foods may be less available to the body because of the high fiber content of plant foods. Fiber is not absorbed into the body. It may tie up minerals, such as iron and they too will not be absorbed. For these reasons vegetarians may be at a higher risk for developing iron deficiency. Because women need more iron than men, they especially need to give special attention to consuming adequate iron.

Dark green leafy vegetables have the highest iron content. Dried fruits, such as raisins, apricots, peaches and prunes, also are high in iron. It is recommended that a food high in vitamin C (brussel sprouts, strawberries, citrus fruits, broccoli, collard greens, mustard greens, cantaloupe) and a food high in iron be eaten at the same meal. Vitamin C increases the availability of iron in the intestinal tract. When vitamin C and iron are eaten together, more iron is absorbed into the body.

Zen Macrobiotics

The vegetarians generating the most concern among health professionals are the Zen Macrobiotics. Members of macrobiotic groups eat diets based on a philosophy with origins in the late 19th century. The macrobiotic diet consists of 10 dietary regimens. In the progression from lower to higher regimens, foods are eliminated from the diet. At the highest level only brown rice is eaten. This diet is claimed to help individuals achieve a state of well-being and to prevent all diseases known to humans.

The American Medical Association's Council on Foods and Nutrition has emphasized that the higher macrobiotic dietary regimens are extremely dangerous. Individual who follow the more rigid of the macrobiotic diets are in danger of developing severe nutrient deficiencies. Cases of scurvy, anemia, starvation and loss of kidney function have been reported, some have resulted in death.

Using Legumes

Vegetarians, as well as meat-eaters, will find that legumes are an excellent food to either extend or replace meat. Legumes are low in cost and high in nutritive value. They contribute iron and B vitamins to the diet. Although the protein quality of legumes is low, they can be combined with small amounts of animal food, such as milk, eggs or cheese, or with other plant foods to yield high quality proteins.

The term legumes refers to dry beans, dry peas and lentils. Legumes usually are found on grocery store shelves in a plastic bag. Look for legumes that are uniform in size and bright in color. Legumes can be stored for six to eight months. Keep them in the original package. Once opened, store them in a tightly covered container in a cool, dry place.

Dry beans are rich in iron, calcium, phosphorus and potassium. Many varieties of dry beans are available, including black beans, garbanzo beans (also called chick peas), kidney beans, lima beans, navy beans and pinto beans. Unless the beans are slow-cooked all day, they should be soaked before cooking. Soaking reduces cooking time and makes beans more tender. Beans can be soaked overnight or brought to a boil for three minutes, removed from heat, covered, and soaked one to four hours. For each cup of beans use two to three cups of water. Test for doneness by piercing with a knife. Cooked beans can be used in many recipes.

Dry peas are good sources of protein, iron, potassium and thiamin. Dry peas are green or yellow and can be purchased split of whole. Whole peas are prepared similar to beans, as described above. Split peas may be soaked for a shorter period of time.

Lentils are disc-shaped legumes similar in size to peas. Lentils are rich in protein, iron, potassium, calcium, and phosphorus. Lentils do not need to be pre-soaked and they cook faster than beans and whole peas.

Summary

A vegetarian diet can meet daily nutrient needs. Vegetarians need to know which nutrients may be lacking in a vegetarian diet. The fewer animal foods eater, the greater the likelihood of nutrient deficiency. **Vegetarians need to give special attention to obtaining enough riboflavin, vitamin B-12, vitamin D., calcium and iron. Total vegetarians or vegans, need to regularly eat vitamin B-12 fortified foods or take a vitamin B-12 supplement.**

In addition, if exposure to sunlight is limited, a vitamin D supplement also is recommended. To consume high quality protein, vegans need to practice protein complementation. Lastly, because it may be difficult for infants, young children and pregnant and lactating women to get enough calories, vegan diets are not recommended for these groups unless the diet is planned and supervised by a qualified health professional.

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2. MAINTAIN A HEALTHY WEIGHT. . .

In this section you will learn about:

promoting healthy eating and exercise habits | page 37

Building Healthy Habits

PRIMARY INFORMATION

What Every Family Child Care Provider Should Know

In applying this dietary requirement to children it might be better to say **"promote eating and exercise habits that will assist the child throughout his or her life in maintaining a desirable weight."**

The concern for a child's weight can be either a concern that they weigh too little or a concern that they weigh too much. The appendix contains the normal growth charts for boys and girls. You will notice that there is much variation in what is considered "normal" growth. Remember, if a child is on the low end of the normal range, or the high end of the normal range, they are still normal. Any place within the normal range is just as good as any other.

You are probably more likely to encounter a parent who is overreacting to a child's weight, than a child whose health is threatened by being overweight or underweight. However, if you feel you have a child in your care who falls in either of these categories, suggest that the parent(s) seek the advice of a health care provider.

The Child That Weighs Too Little:

The child that weighs too little may suffer from a failure to thrive. This can be very serious. Do not try to force feed the child. This can actually make the child eat less. Suggest that the parents consult a health care professional.

The Child That Weighs Too Much:

Overweight children do not necessarily become overweight adults. The vast majority of children with weight problems naturally become more slender as they grow older. Children are in a phase of rapid growth and development. Their need for calories and nutritionally sound meals and snacks is crucial. Restricting their diet in an effort to control their weight can be much more harmful to them than being overweight. **Never put a child on a restrictive diet unless you are instructed to do so by a health care professional.**

In meeting this dietary requirement, your responsibility as a family child care provider is to **promote a positive feeding relationship with the children in your care , provide them with healthy food choices, and encourage them to exercise.** This will help them to form healthy habits, increasing the odds that they will maintain a desirable weight throughout their lives. Learning these good habits when they are young is much easier for them than restricting their diets or changing bad habits when they are older.

(For more information about your role in assisting children in forming healthy habits, see Chapter 1, Mealtime in the Family Day Care Home .)

Remember: If you are concerned about the weight of a child in your care, suggest to the parents that they consult a health care professional.

3. CHOOSE A DIET LOW IN FAT, SATURATED FAT AND CHOLESTEROL...

This does not apply to children under two years old.

Children under two years old have a greater need for fat in their diets. Reducing their fat intake could be harmful.

In this section you will learn about:

limiting fat and cholesterol	page 41
reading food labels for fat, saturated fat, and cholesterol content	page 51

Helpful charts are provided on the fat and cholesterol contents of:

dairy foods	page 45
beef, pork and lamb	page 46
poultry and fish	page 47
fruits and vegetables	page 48
beans, grains and nuts	page 49
fats and condiments	page 50

To learn more, read the supporting information:

calculating fat consumption	page 57

Limiting Fat and Cholesterol

PRIMARY INFORMATION

What Every Family Child Care Provider Should Know

As you know from the earlier discussion of nutrients, fat is one of the essential nutrients. It is our most concentrated source of energy. We need fat to build body tissue and to support organs such as the kidneys. The problem is that **most Americans eat too much fat.**

Limiting Fat For Healthy Adults

The American Heart Association recommends that healthy adults reduce their fat intake to no more than 30% of their calories. Saturated fat should make up no more than 10% of calories, monounsaturated fat should make up no more than 10% of calories, and polyunsaturated fat should make up no more than 10% of calories. Cholesterol intake should be limited to no more than 300 milligrams per day.

Do Not Limit Fat For Children Under Two

Children under two need more fat in their diets than older children and adults. At this age they are growing and developing rapidly both mentally and physically. They need the calories that high fat foods provide. Do not reduce their fat intake. You can begin to reduce the fat in children's diets after the age of two.

A Warning About Limiting Fat in the Diets of Children Over Two

When we limit fat, we limit calories. This is seldom a problem for adults, but it can rob children of the calories they need to grow and develop properly. **Because children need so many calories, we need to make sure that we make up for the calorie loss due to reducing fat by offering them more of other foods and by offering them food many times during the day. The best foods to offer them in place of those foods high in fats, are those foods high in complex carbohydrates such as potatoes, grains, breads, cereals, rice and pasta.** You may remember from the information on the food guide pyramid that this food group is located on the lowest level of the pyramid, the level from which the largest portion of our diet should come. (You will read more about carbohydrates in the information on the 4th dietary guideline, page 59.) **If you do not replace the calories lost when you limit the fat in children's diets, you may be placing their health at risk.**

In order to understand the recommendation to lower fat, saturated fat, and cholesterol in the diet, we need to know a little about fat and cholesterol.

CHOLESTEROL:

Cholesterol is a fat-like substance found only in animal fats and food products that come from animals, like meats and dairy products. Egg yolks and organ meats such as liver are very high in cholesterol. The human body can make all of the cholesterol it needs. The cholesterol we get from animal fats and other animal products is really extra. This extra can cause fat to build up and block the blood's passage through the arteries. This can lead to heart disease and hardening of the arteries.

FATS:

Fats are made up of two major kinds of fatty acids. These are saturated fatty acids and unsaturated fatty acids, including polyunsaturated fats and monounsaturated fats. All fats actually have both kinds of fatty acids, both saturated and unsaturated. When a food label reads "saturated fat," it actually means that it is mainly saturated fatty acids. When it says "unsaturated" or polyunsaturated," it means it has mainly unsaturated fatty acids and contains very little saturated fatty acids.

SATURATED FATS:

Saturated fats should be limited because they tend to raise the level of cholesterol in the blood and have been linked to increased risk for heart disease. Saturated fat is the main component of animal products but can also be found in some vegetable products. These vegetable products include coconut oil, cocoa butter, palm oil, and macadamia nuts. Saturated fats are often solid at room temperature.

UNSATURATED FATS:

1. Polyunsaturated Fats:

Polyunsaturated fats are fats that come from plant sources. Some medical researchers believe that they help lower the level of cholesterol in the blood. Corn oil, cotton seed oil, safflower oil, sunflower seed oil, sesame seed oil, and soybean oil are high in polyunsaturated fat. Choose salad dressings, cooking fats, and margarines high in polyunsaturated vegetable oils. Margarines that list "liquid corn oil" or any other polyunsaturated oil in liquid form, as the first ingredient on the label, are highest in polyunsaturated oils.

2. Monounsaturated Fats:

These fats do not increase blood cholesterol level and may be beneficial in lowering cholesterol. Olive oil, peanut oil, canola oil, and margarines with partially hydrogenated oil listed on the label as the first ingredient are high in monounsaturated fats.

The following diagram shows where different kinds of oils fall on a scale going from liquid to solids. Liquid oils are polyunsaturated. Most vegetable oils are in this category. Solid oils are saturated. These include butter, lard, and the fat in meats. Monounsaturated and hydrogenated oils fall somewhere in between liquid and solid. While researchers don't all agree on whether polyunsaturated or monounsaturated oils are best to include in your diet, they do all agree that you should limit your intake of saturated fat.

Polyunsaturated ----------> Monounsaturated ----------> Hydrogenated ----------> Saturated

Polyunsaturated	Monounsaturated	Hydrogenated		Saturated
Most Vegetable Oils	**Olive Oil Peanut Oil Canola Oil**	**Margarine**	**Coconut Oil Palm Oil**	**Butter Lard Shortening**

Liquid-- Solid

Source: Off To A Good Start: Practical Nutrition for Children. Catherine Romaniello and Nancy Van Domelen. Wildwood Resources, Inc. 1982.

Limiting saturated fat and cholesterol:

To limit the amount of saturated fat and cholesterol you consume, **decrease your intake of the following foods:**

1. **Fat-rich pastries and desserts** such as those made with butter or cream.
2. **Fats and oils** especially those high in saturated fats such as butter, lard, and lard based shortenings, heavily hydrogenated fats (some margarines), and foods containing palm and coconut oils .
3. **Fat- rich meats** like organ meats, sausage, regular ground beef, and heavily marbled cuts of meats.
4. **High-fat dairy products** such as whole milk, cream, sour cream, and most cheeses.
5. Foods that contain fat such as **breaded and deep-fried foods.**

Instead:

1. **Choose dry beans or dry peas** as protein sources.
2. **Choose skim or low-fat milk and milk products like yogurt and cheeses except when serving children under two.** Children under two need the fat in whole milk and whole milk cheeses and yogurts. (There are many different kinds of cheeses. Some have more fat than others. See the Special Issue Block on Choosing Cheese Wisely, page 94, for more detailed information on the fat content of different cheeses.)
3. **Choose lean meats like chicken, turkey, fish, lean beef cuts (top round, eye of round, top loin and sirloin, lean hamburger)** and lean pork cuts (tenderloin, loin, chops, ham). **The "select" grade cuts are the leanest grade.** If "select" grade cuts are not available, choose "choice" grade. "Prime" grade contains the most fat. Avoid it if possible. **Trim fat off all meats and remove skin from chicken and turkey before cooking.**
4. **Select leaner ground beef.** Generally the lower the price and **the lighter the color, the more fat** has been ground up with the meat. If you prefer not to pay extra for ground beef with less fat, remove excess fat after cooking by draining the meat.
5. **Use fat-free cooking methods** like broiling, baking, grilling, poaching, steaming or boiling rather than frying.
6. **Choose margarine and vegetable oils like canola, corn, sunflower, soybean, and olive oils.**
7. **Try angel food cake, frozen fruit bars or low-fat frozen yogurt in place of rich creamy desserts.**
8. **Use non-stick vegetable sprays** to reduce added fat when cooking.
9. **Serve vegetable and broth-based soups** or use low fat milk when making cream soups.
10. **Serve tuna packed in water**, not in oil.

11. **Skip toppings like butter, margarine, gravy and sour cream** which add extra fat and calories. Try using grated parmesan cheese, herbed cottage cheese or low fat yogurt for toppings instead.

12. **Read food labels carefully** to determine both amount and type of fat present in foods. Remember: Your major concern is **to lower your total fat and cholesterol intake. Limit foods containing animal fats. Choose foods higher in unsaturated, polyunsaturated, or monounsaturated fats rather than in saturated fats.**

HINT: **In most cases you will not need to give up a favorite high-fat food item. There are other ways you can reduce your fat intake.**
Consider:

1. **Eating or serving a high-fat food less often.**

2. **Eating or serving a smaller portion of a high-fat food item.** (If you are enrolled in the Child and Adult Care Food Program, you must offer portion sizes that meet the minimum Child and Adult Care Food Program requirements.)

Fat And Cholesterol Content of Selected Dairy Foods

Food Item	Total Fat (grams)	Saturated Fat (grams)	Cholesterol (mg)
Ice cream, premium, hardened, 16% fat (1 cup)	24	14.7	88
Ice cream, 10% fat (1 cup)	14	8.9	59
Ice milk, hard, (1 cup)	6	3.5	18
Yogurt, frozen, nonfat (1cup)	0	0	0
Egg, 1 large	6	1.7	274
white only, 1 large	trace	0	0
yolk only, 1 large	6	1.7	274
American cheese, 1 oz.	9	5.6	27
Cheddar or Colby cheese, 1 oz.	9	6.0	30
Parmesan cheese, grated (2 Tbsp.)	4	2.0	8
Swiss or Provolone cheese, 1 oz.	8	5.0	26
Mozzarella, part skim, 1 oz.	5	3.1	15
Cream cheese, 2 Tbsp.	10	6.2	32
Neufchatel cheese, 2 Tbsp.	6	4.2	22
Ricotta, part skim, 1/2 cup	10	6.1	38
Cottage Cheese, 1/2 cup			
creamed, 4% fat	5	3.0	15
low-fat, 2% fat	2	1.4	9
Sour cream, 1Tbsp.	3	1.6	5
Sour half & half, 1 Tbsp.	2	1.1	6
Milk, 1 cup			
skim or non-fat	trace	trace	4
1% fat	3	1.5	10
2% fat	5	2.9	18
whole	8	5.1	33
Buttermilk	2	1.3	9
Chocolate, 2% fat	5	3.1	17
Yogurt, low-fat, 8 oz.			
with fruit	3	1.6	10
plain	4	2.3	14

Source: Information for this chart was taken from a poster produced by Nutrition Graphics, P.O. Box 276264, Sacramento , CA. 1989, revised 1991.

Fat And Cholesterol Content of Beef, Pork, Lamb & Veal

Food Item	**Total Fat** (grams)	Saturated Fat (grams)	Cholesterol (mg)
Beef, 3 oz., cooked, trimmed of visible fat:			
Pot Roast, chuck	9	3.2	85
Round Steak	7	2.5	70
Tenderloin, top loin	8	3.2	70
Brisket, 3 oz. lean	11	3.9	79
Corned beef, 3 oz.	16	5.4	83
Short ribs, 3 oz.	15	6.6	79
Summer sausage, 3 oz.	25	10.2	63
Ground beef, cooked, 3 oz.			
extra lean, round/sirloin	14	5.5	69
lean, ground chuck	16	6.4	71
regular	19	7.5	75
Pork , fresh, cooked:			
Chop, 1 large, 3 oz. lean	9	3.2	59
Pork Roast, 3 oz. lean	11	3.7	81
Pork ribs, 1-2 large	26	10.0	103
Pork fat or salt pork, 1 oz.	23	8.3	25
Sausage, 4 links	16	5.6	44
Polish/ Italian sausage (3 oz.)	23	8.0	65
Pork, cured:			
Ham, canned, 3 oz.	13	4.3	52
Ham, extra lean, 3 oz.	5	1.5	45
Bacon, 3 slices	10	3.3	16
Bologna, 2 slices, 2 oz.	9	3.2	28
Salami, cooked, 2 oz.	11	4.6	37
Frankfurter, 1	13	4.8	23
Lamb, 3 oz. chop	8	3.4	78
Leg of Lamb, 3 oz., lean	7	2.8	75
Veal, 3 oz. chop	7	2.1	138
Rib roast, 3 oz. lean	5	1.8	108

Source: Information for this chart was taken from a poster produced by Nutrition Graphics, P.O. Box 276264, Sacramento , CA. 1989, revised 1991.

Fat and Cholesterol Content of Poultry & Fish

Food Item	Total Fat (grams)	Saturated Fat (grams)	Cholesterol (mg)
Chicken, 1/2 breast, medium:			
fried, batter dipped	19	4.9	119
fried, flour dipped	9	2.4	88
roasted, skin eaten	8	2.2	83
roasted, skin removed	3	.9	73
Chicken, 1 thigh:			
roasted, skin removed	6	1.6	49
Chicken frankfurter, 1	9	2.5	45
Chicken fat, 1 Tbsp.	13	3.8	11
Turkey, roasted:			
light meat, 3 oz.	3	.9	59
dark meat, 3 oz.	6	2.1	72
Turkey ham, 2 slices, 2 oz.	3	1.0	32
Fish, fresh or plain frozen, 3 oz. cooked:			
Cod and Pike	1	.1	47
Flounder and Sole	1	.3	58
Salmon, fresh	9	1.6	74
Snapper and Ocean Perch	2	.3	45
Whiting	1	.3	71
Fish Sticks, frozen, 3	10	2.6	93
Tuna in oil, drained, 3 oz.	7	1.3	55
Tuna in water, 3 oz.	1	.1	48
Shellfish:			
Clams, 3 oz.:			
steamed or canned	2	.2	57
breaded and fried	10	2.3	52
Crab meat, 3 oz. cooked	1	.1	50
Lobster, 3 oz., cooked	1	.1	61
Oysters, 6 East. or 2 Pac.	2	.5	46
Scallops, 4 large or 10 small	1	.1	20
Shrimp, canned, 3 oz.	1	.2	128
breaded and fried, 7 med.	10	1.8	150
Duck, roasted, 1/4 duck:			
flesh and skin	54	18.5	160
flesh, skin removed	13	4.6	99

Source: Information for this chart was taken from a poster produced by Nutrition Graphics, P.O. Box 276264, Sacramento , CA. 1989, revised 1991.

Fat and Cholesterol Content of Fruits and Vegetables

Food Item	Total Fat (grams)	Saturated Fat (grams)	Cholesterol (mg.)
Fruits, except avocado	trace	trace	0
avocado, 1 medium	30	4.9	0
Vegetables: fresh, canned or plain frozen	trace	trace	0
Potatoes:			
Baked, plain, 1 medium	trace	trace	0
Baked, 2 Tbsp. butter	22	14.4	62
Baked, 1 Tbsp. soft margarine & 1 Tbsp. sour cream	14	3.4	5
Baked, 1 Tbsp. imitation margarine & 1 Tbsp. yogurt	6	1.2	1
Mashed, cup with milk and margarine	9	2.2	4
Scalloped, 1 cup	10	6.0	28
Au gratin from mix, 1 cup	6	2.9	12
Hash browns, frozen, 1 cup	18	7.0	0
French fries, fried in Vegetable oil, 30 strips	24	7.5	0
Potato chips, 30	21	5.4	0
Potato salad with mayonnaise, 1 cup	21	3.6	170

Source: Information for this chart was taken from a poster produced by Nutrition Graphics, P.O. Box 276264, Sacramento , CA. 1989, revised 1991.

Fat and Cholesterol Content of Beans, Breads, Pasta, and Nuts

Food Item	Total Fat (grams)	Saturated Fat (grams)	Cholesterol (mg.)
Beans:			
Plain, cooked, 1 cup	1	.1	0
Pork and Beans, canned, 1 cup	7	2.4	10
Refried Beans, canned, 1 cup	3	.4	0
Breads and Pastries:			
Bagel, plain, 1 medium	2	.3	0
Biscuit, from recipe, 1	5	1.2	trace
Bread, 1 slice	1	.2	trace
Bun, hotdog/hamburger, 1	2	.5	trace
Cornbread, 2-1/2 inch square	8	1	32
Croissant, 1, 4 inch	12	3.5	13
Danish pastry, 1, 4 inch	12	3.6	49
Doughnut, cake type, 1	12	2.8	20
raised (contains yeast) 1 medium	13	5.2	21
English muffin, 1	1	.3	0
French Toast, 1 slice	7	1.6	112
Muffin, bran, 1 medium	6	1.4	24
Pancakes, 2, 4 inches in diameter	4	1.0	32
Tortilla, corn,1	1	.1	0
Tortilla, flour, 1	4		0
Waffle, from mix, 1, 7 inch	8	2.7	59
Cereal, 1 ounce	1-6	0-4	0
Pasta, rice, etc.:			
Bread stuffing, 1 cup	26	5.3	67
Chow mein noodles, 1 cup	11	2.1	5
Egg noodles, 1 cup cooked	2	.5	50
Pasta, 1 cup cooked	1	.1	0
Rice, plain, 1 cup cooked	trace	0	0
Nuts and Seeds, 1 ounce:			
almonds, dried	15	1.4	0
cashews, oil roasted	14	2.7	0
mixed nuts, oil roasted	16	2.5	0
mixed nuts, dry roasted	15	2.0	0
peanut butter, 2 Tbsp.	16	2.8	0
pecans or English walnuts	19	1.5	0
pumpkin or squash kernels	13	2.5	0
sunflower seed kernels	14	1.7	0

Source: Information for this chart was taken from a poster produced by Nutrition Graphics, P.O. Box 276264, Sacramento , CA. 1989, revised 1991.

Fat and Cholesterol Content of Selected Fats and Condiments

Food Item	**Total Fat** (grams)	Saturated Fat (grams)	Cholesterol (mg.)
Table and Cooking fats:			
Butter, 1 Tablespoon	12	7.2	31
Margarine, 1 Tablespoon			
Stick	11	2.2	0
Tub, soft	11	1.9	0
Spread, soft (60% fat)	9	1.8	0
Imitation (40% fat)	6	1.1	0
Lard, 1 Tablespoon	13	5.0 .	12
Vegetable oil, 1 Tbsp.:			
Canola	14	.9	0
Safflower oil	14	1.2	0
Sunflower oil	14	1.4	0
Corn oil	14	1.7	0
Olive oil	14	1.8	0
Soybean oil	14	2.0	0
Peanut oil	14	2.3	0
Palm oil	14	6.7	0
Palm kernel oil	14	11.1	0
Coconut oil	14	11.8	0
Vegetable shortening, solid, 1 Tbsp.	13	3.2	0
Condiments and Sauces:			
Barbecue sauce, 1 Tbsp.	1	.1	0
Beef bouillon, 1 cup	1	.3	trace
Catsup, 1 Tbsp.	0	0	0
Gravy, 1/4 cup, canned	1-3	.8	1
from dry mix, 1/4 cup	trace	0	trace
Hollandaise sauce, 1/4 cup	5	2.9	13
Jam or jelly	0	0	0
Mayonnaise, 1 Tbsp.	11	1.2	8
Mustard, 1 Tbsp.	0	0	0
Nacho cheese sauce, 1/4 cup	8	3	9
Olives, 3-4	2	.3	0
Salad dressing, 1 Tbsp.			
regular, bottled	6-8	1.5	0-4
low-calorie	2	.2	0
Sweet and sour sauce, 1 Tbsp.	0	0	0
Tartar sauce, 1Tbsp.	8	1.2	4
White sauce, 1/4 cup	3	1.6	9

Source: Information for this chart was taken from a poster produced by Nutrition Graphics, P.O. Box 276264, Sacramento , CA. 1989, revised 1991.

READING FOOD LABELS FOR FAT AND CHOLESTEROL CONTENT

PRIMARY INFORMATION

What Every Family Child Care Provider Should Know

There are two basic types of food labels, nutrition labels and ingredient labels. Both types of labels give you information about the fat content of the food product and can help you to select the product lowest in fat, saturated fat, and cholesterol.

Ingredient Labels

Most packaged and processed foods include a label listing the ingredients. Ingredients are listed by weight, with the item present in the greatest amount listed first, and the item present in the least amount listed last. Although amounts of ingredients are not given, the order, number, and types of fats listed can be helpful. The following lists will help you identify ingredients high in saturated fat and ingredients high in unsaturated fat.

Ingredients High In Saturated Fat
Beef Fat
Butter
Cream
Lard
Cocoa Butter
Coconut Oil
Palm Oil

Ingredients High in Unsaturated Fat
all liquid or partially hydrogenated oils
Corn Oil
Cottonseed Oil
Safflower Oil
Sesame Oil
Soybean Oil
Sunflower Oil

Nutrition Labels

Nutrition labels provide detailed information about the nutrients in a food product. They list the amount of fat in the product (in grams) per serving and usually give the product's percentage of calories from fat. Most nutrition labels also give the amounts of polyunsaturated fat, saturated fat, and cholesterol. **When using the nutrition label to evaluate or compare food items according to their fat content, it is very inportant to note the serving size listed on the label.** Not all manufacturers of the same food product base their measures of fat content on the same servings size. In addition, what the food manufacturer calls a serving and what you might call a serving, are not necessarily the same.

Example 1:
Comparing Mayonnaise and Imitation (Reduced Calorie) Mayonnaise

This example compares labels from mayonnaise and imitation (reduced calorie) mayonnaise. First the ingredient labels are compared; Then the nutrition labels are compared.

MAYONNAISE
Ingredients: Soybean oil, eggs, water, vinegar, egg yolks, salt, sugar, lemon juice, paprika, dehydrated garlic, dehydrated onion, calcium d EDTA to protect flavor, natural flavor.

IMITATION (REDUCED CALORIE) MAYONNAISE
Ingredients: Water, soybean oil, food starch-modified, egg yolks, vinegar, salt, eggs, mustard, flour, phosphoric acid, dl-x-tocopheryl acetate (vitamin E), calcium d EDTA to protect flavor, natural and artificial flavor, oleoresin, paprika, beta carotene (color).

Both of these food products contain soybean oil, an ingredient high in unsaturated fat. It is the first ingredient and therefore the major ingredient in the regular mayonnaise. Water is the major ingredient in the imitation mayonnaise with soybean oil as the second ingredient. This tells you that regular mayonnaise has more fat (unsaturated) than the imitation (reduced calorie) mayonnaise. Remember the following: **To avoid fat, go easy on products listing fat or oil first, or listing many fat and oil ingredients on their label.**

What if you were interested in selecting the mayonnaise with the least amount of cholesterol? How would you know which product to select from reading the list of ingredients?

Soybean oil does not contain cholesterol. **(Only products of animal origin can contain cholesterol.)** However, both kinds of mayonnaise list eggs and egg yolks among their ingredients. Eggs, especially the egg yolks, are high in cholesterol. The regular mayonnaise lists eggs as the 2nd ingredient and egg yolks as the 5th ingredient. The imitation mayonnaise lists egg yolks as the 4th ingredient and eggs as the 7th ingredient. It is impossible to tell from this information which product contains the least amount of cholesterol. All we can know from the list of ingredients is that both the mayonnaise and the imitation (reduced calorie) mayonnaise contain cholesterol. To determine actual cholesterol content, it is best to read the nutrition labels.

MAYONNAISE
Nutrition information per serving

Serving size	1 tablespoon (14g)
Servings per package	32
Calories	100
Protein	0
Carbohydrate	0
Fat (provides 99% of calories)	11g
Polyunsaturates	6g
Saturates	2g
Cholesterol (50mg/100g)	5mg
Sodium	70mg

IMITATION (REDUCED CALORIE) MAYONNAISE
Nutrition information per serving

Serving size	1 tablespoon (14g)
Servings per package	32
Calories	45
Protein	0
Carbohydrate	1g
Fat (provides 93% calories)	5g
Polyunsaturates	3g
Saturates	1g
Cholesterol (40mg/100g)	5mg
Sodium	90mg

With the information provided on nutrition labels, it is easy to compare the fat and cholesterol content of different products. **The nutrition labels of the two kinds of mayonnaisse used in the example show that compared to mayonnaise, an imitation (reduced calorie) mayonnaise may contain only half as much fat, but about the same amount of cholesterol.**

If you wanted to limit your overall fat consumption, you would choose the imitation (reduced calorie) mayonnaise.

If your only concern was limiting your cholesterol intake, you would not benefit from using the imitation (reduced calorie) mayonnaise. A better way for you to reduce your cholesterol intake might be to reduce the amount of mayonnaise you consume, or replace the mayonnaise in your diet with a lower cholesterol alternative.

Example 2:
Comparing 2 Different Kinds of Yogurt

The following example compares labels from two different kinds of yogurt. The first label is from a fruit on the bottom yogurt in which the fat has *not* been reduced. The second label is from a non-fat yogurt. Nutrition labels are compared first; then ingredients labels are compared.

FRUIT ON THE BOTTOM YOGURT
Nutrition information per serving
Serving size: 8oz.
servings per container: 1

calories	240
protein	9g
carbohydrates	43g
fat	3g
cholesterol	10mg
sodium	120mg

NON-FAT YOGURT
Nutrition information per serving
Serving size: 8oz
Servings per container: 1

calories	164
protein	9g
carbohydrates	31g
fat	0g
cholesterol	0mg
sodium	135mg

FRUIT ON THE BOTTOM YOGURT
Ingredients: grade A milk, skim milk, peaches, sugar, corn sweeteners, pectin, natural flavors and yogurt cultures.

NON-FAT YOGURT
Ingredients: Pasteurized grade A nonfat milk with acidophilus and other living yogurt cultures, mixed fruit juice concentrate, guava puree, papaya puree, natural flavors, lemon juice concentrate, whey protein concentrate, annatto (for color).

The serving sizes are the same (1 cup) for both kinds of yogurt. The fruit on the bottom yogurt is made with milk (which means whole milk) and skim milk. It contains 3 grams of fat and 10 milligrams of cholesterol. The non-fat yogurt is made with non-fat milk. It has no fat or cholesterol. If you were concerned with lowering the fat and cholesterol in your diet, your best choice would be the non-fat yogurt.

Example 3:

Comparing Two Different Kinds of Breakfast Cereal

In this example, two different breakfast cereals are compared. Note that the first cereal is labeled as "All Natural - LowFat." The label "all natural" can mean many things and does not necessarily mean the product is better for you than a product without the "all natural" label. **Similarly, labeling a product "low-fat" only means that the company has to provide you with the information on fat content. It does not necessarily mean that the product has less fat than a similar product.** New labeling laws establishing standard definitions for terms like "low-fat" and regulating their use are expected to go into effect soon. Until then, don't just believe the food manufacturers' claims about fat content or the nutritional content of the food product. Read the labels.

BRAND A CEREAL:
All Natural, Low Fat
Nutrition Information (per serving)
Serving Size : 1 ounce (2/3 cup)

Calories	110
Protein	2g
Carbohydrates	23g
Total Fat	6g
Polyunsaturated Fatty Acid	4g
Saturated Fatty acid	2g*
Cholesterol	10mg
Sodium	180mg
Potassium	55mg

*Applies if coconut oil is used.

Percent of U.S. RDA

Protein	4
Vitamin A	2
Vitamin C*	
Thiamin	25
Riboflavin	25
Niacin	25
Calcium	15
Iron	15
Vitamin D	10
Vitamin B6	25
Folic Acid	25
Vitamin B12	25
Phosphorus	4
Magnesium	4
Zinc	2
Copper	4

*Contains less than 2% of the U.S. R.D.A.

BRAND B CEREAL
Nutrition Information (per serving)
Serving size: 1 1/4 ounces (3/4 cup)
Servings per package : 1

Calories	110
Protein	2g
Carbohydrates	28g
Fat, Total	0g
Unsaturated	0g
Saturated	0g
Cholesterol	0mg
Sodium	90mg
Potassium	220mg

Percent of U.S. RDA

Protein	4
Vitamin A	10
Vitamin C	0
Thiamin	20
Riboflavin	20
Niacin	20
Calcium	0
Iron	90
Vitamin D	10
Vitamin B6	20
Folic Acid	20
Vitamin B12	20
Phosphorus	10
Magnesium	15
Zinc	20
Copper	8

BRAND A CEREAL
Ingredients: Whole wheat, rolled oats, sugar, corn, brown sugar, *partially hydrogenated soybean and/or coconut oil,* malted barley, salt, corn syrup, coconut, whey, malt syrup, honey, artificial flavor, artificial food coloring (yellow No.5), BHT, MSG.

BRAND B CEREAL
Ingredients: Wheat bran with other parts of wheat, raisins, sugar, corn syrup, salt, malt flavoring, iron, niacinamide, zinc oxide, pyridoxine hydrochloride , riboflavin , vitamin A palmitate, thiamin hydrochloride , folic acid, vitamin B12 and vitamin D.

The first thing you might notice when you compare the nutrition labels from these two cereals is that their serving sizes differ. The serving size for Brand A is 1 ounce or about 2/3 cup while the serving size for Brand B is 1 1/4 ounce or about 3/4 cup. An average adult will eat about 2 ounces (1 1/3 cup). If you wanted to compare calories for these two cereals, the different serving sizes could fool you. Both cereals have 110 calories per serving, but because the serving size is smaller for cereal A, cereal A is the highest in calories.

When you compare fat for the two cereals used in this example, you notice a surprising fact. The cereal labeled low-fat contains more fat than the cereal without the low-fat label. In addition, one serving of the low-fat cereal would provide you with 10mg of cholesterol. The list of ingredients from the low-fat cereal (Brand A) shows that either soybean oil or coconut oil is used. The label does not specify which one is used, but in terms of the kind of fat the product contains, it makes a big difference. Soybean oil is polyunsaturated; coconut oil is saturated.

The other cereal used in this example (Brand B) contains no fat, saturated fat or cholesterol. If you were concerned with limiting your intake of fat, saturated fat and cholesterol, you would choose Brand B.

A Shortcut for Evaluating Food Items by the Grams of Fat Listed On Labels:

In making wise food choices it is helpful to have some idea about what is considered a high fat food item, and what is considered a low fat food item. This will be different depending upon whether the food item is an entree, a side dish or dessert. The following chart provides a guideline for evaluating food items by the fat content listed on food labels.

Fat Grams for Entrees	Fat Content
0-9 grams	low
10-15 grams	medium
more than 15 grams	high

Fat Grams for Snacks, Desserts, or Side Dishes	Fat Content
0-4 grams	low
5-6 grams	medium
more than 6 grams	high

Calculating Fat Consumption

Supporting Information

For the Provider Who Wants To Know More

The American Heart Association and other health organizations recommend that **individuals over 2 years old limit their fat intake to 30% of their total calorie intake and limit saturated fat to no more than 10% of the total fat intake.** It would be very time-consuming to keep track of your daily calorie intake and calculate the number of calories you derived from fat. Luckily there is an easier method. While it is not exact it will give you a good guideline to follow.

Remember: the American Heart Association recommendation does not mean that you should limit your fat to 30% of calorie intake for each meal. This recommendation applies to your diet as a whole, all of your meals over several days. Some meals will exceed the recommended fat intake, others may be much less. They should average out to comply with the recommendation.

As a guideline:

Daily Calorie Intake	Total Fat	Saturated Fat
1,600	53 grams	5 grams
2,000*	67 grams	6 grams
2,200	73 grams	7 grams
2,800	93 grams	9 grams

It is very difficult to give an average for the number of calories consumed daily by children. In general, we know that boys usually consume a little more than girls, and calorie consumption increases with age. But, **calorie intake for children can change dramatically from one day to the next.** One day a child has a big appetite and chooses foods with lots of calories. The next day he/she just doesn't seem very interested in eating at all. However, here is a general range of daily calorie consumption for children 3-6. (*Remember, you do not want to limit fat in the diets of children 2 years old or younger.*) **On the average, children between the ages of 3 and 6 will consume between 1,500 and 1,800 calories a day. This means that they should consume between 50 and 60 grams of total fat and between 5 and 6 grams of saturated fat.**

* The average number of calories consumed daily by women between the ages of 23 and 50 is 2,000.

Here is the formula you can use to calculate the recommended fat consumption.

1. Take the total number of calories consumed daily and multiply by .3 .
2. Divide that number by 9. (There are 9 calories in each gram of fat.) The answer gives you the maximum number of grams of total fat you should consume daily.
3. Divide that number by 10, and you have the maximum number of grams of fat that should be saturated fat.

number of calories times .3 = X
X divided by 9 = grams of total fat
grams of fat divided by 10 =
grams of saturated fat

Example: The recommended fat consumption for a child 4 years old who eats approximately 1,800 calories a day is:

1,800 x .3 = 540
540/9 = 60 grams of fat
60/10 = 6 grams of saturated fat

4. CHOOSE A DIET WITH PLENTY OF VEGETABLES, FRUITS, AND GRAIN PRODUCTS SO THAT YOU GET ADEQUATE STARCH AND FIBER. . .

In this section you will learn about:

complex carbohydrates (starch) page 61
and fiber page 63

There is also information on special issues:

getting enough of vitamins A and C page 65
vegetables: should I purchase fresh, frozen or canned page 66

Complex Carbohydrates (Starch)

PRIMARY INFORMATION

What Every Family Child Care Provider Should Know

Starch is a complex carbohydrate. It is our major source of energy. Complex carbohydrates are supplied by the foods that make up the **lowest two levels of the food guide pyramid. The lowest of these levels, the food group from which the largest portion of our diet should come, is the breads, cereals, pastas, and other grain products.** (This food group is also beneficial as an alternative to high-fat animal sources of protein.) **The next level of the food guide pyramid and our second good source of complex carbohydrates or starch is vegetables and fruits. Foods from these two levels of the food guide pyramid should make up the bulk of our diet.**

Starches or complex carbohydrates play an even more important role in our diets when we are limiting our intake of fat as recommended in dietary guideline #3. Fat is high in calories, which means it is a good source of energy. If we limit fat without making up for the calorie loss with other foods, we reduce our energy level. In order to maintain the same energy level, **when we lower the fat in our diet, we should increase our intake of complex carbohydrates (starch). This is vital in children's diets. Children are active and burn a lot of calories. They must have a good source of energy.**

Even though carbohydrates are an essential part of the diet, some people still believe they are to be avoided. The misinformation about carbohydrates may be due to two factors.

1. At one time dieters avoided many of these starchy foods because they thought that they were high in calories. However, it is not the starchy foods themselves that are high in calories but the toppings, like butter, sour cream, or cream sauces, that people sometimes add to starchy foods. Starches provide only 4 calories per gram, while fat provides 9 calories per gram. Without high fat toppings, or with only moderate amounts, complex carbohydrate foods can be less fattening than animal-protein foods that naturally contain fat.

2. Carbohydrates come in two forms: complex carbohydrates or starch and simple carbohydrates or sugar. Sugar has little nutritional value beyond the calories it provides. However, unlike sugar, **starches provide us with energy plus many other essential nutrients.**

Some Good Sources of Starch Include:

Breads, whole grain and white
Breakfast cereals, cooked and ready-to-eat
Flours, whole-grain and white
Pastas, like spaghetti and macaroni
Rice and barley
Dry peas, dry beans, and lentils
Starchy vegetables such as potatoes, butter beans, corn, sweet peas, lima beans, and navy beans.

Fiber

PRIMARY INFORMATION

What Every Family Child Care Provider Should Know

The same foods which provide us with complex carbohydrates also provide us with **dietary fiber**, sometimes called **"roughage."** Dietary fiber refers to parts of plant foods that are generally not digestible by humans. Even though dietary fiber is not digestible, it is still important to include in our diets. **Eating foods high in fiber reduces the symptoms of chronic constipation, some intestinal diseases like diverticular disease, and some types of "irritable bowel."** Recent scientific research suggests high fiber diets **may also reduce the risk of colon cancer.**

The following lists contain common foods which are rated as either high fiber foods (shown on the left) or low fiber foods (shown on the right).

HIGH FIBER FOODS INCLUDE:

Whole wheat flour and whole grain breads
Shredded wheat, oatmeal, and bran-type cereals
fresh fruits with skins
bananas
berries
dried fruits
raw vegetables
beans
nuts
brown rice
corn meal

LOW FIBER FOODS INCLUDE:

White bread, English muffins, soda crackers
refined cereals, creams of wheat and white rice
refined (white) flour
cooked and canned fruits
milk
cheese
meats
eggs

Warning About Children and Fiber:

Children do not need to eat as much fiber as adults. Eating too much fiber can cause problems for children.

1. Foods containing fiber add bulk and make children feel full. Children need some fiber in their diets but too much may fill them up so they don't have room for the other foods they need to supply them with the essential nutrients.

2. Too much fiber may give a child gas or loose bowels.

3. Too much fiber can interfere with the body's ability to absorb other nutrients.

Because too much fiber can cause problems for children, **let children get fiber from the foods that contain it naturally**. For some adults it may be wise to eat cereals and breads with extra fiber added. These foods are not recommended for children. **Serving a variety of fruits, vegetables, breads, cereals, and grain products is sufficient to insure that children get adequate but not excessive fiber.** There is no need to serve children foods in which fiber from some other source has been added.

As an adult, you may want to consider including foods with added fiber in your diet.

To be sure that children get adequate starch and fiber:

- Choose foods that are good sources of fiber and starch such as whole-grain breads and cereals, fruits, vegetables, and dry beans and peas.
- Substitute starchy foods for those that have high amounts of fat and sugars.

Constipation and Children

Don't worry if a child in your care does not have a bowel movement every day. If the stool is soft, the child is probably not constipated. Constipation usually causes a hard, dry stool that is hard to pass. **If you do think the child is constipated, do not give him or her laxatives or other medications.** Instead, mention your concern to the child's parents. They may need to take the child to see a health care provider to make sure there are no other problems.

To help prevent constipation, make sure the children in your care drink plenty of liquids, eat foods rich in fiber like fresh fruits and vegetables and whole grain breads, and get plenty of exercise. Work with parents to help children establish regular bowel habits. Because eating or drinking often stimulates bowel movements, after the meal may be the best time for a child to sit on the toilet. Children need about 10 minutes of unrushed time each day for toileting.

From: "Is Your Child Constipated?" Adapted from Alta California Regional Center. Sacramento, CA. by Contra Costa Public Health Services, Contra Costa, California.

Special Issue: Getting Enough of Vitamins A and C

Vitamins A and C are the two vitamins most often lacking in American children's diets. Neither of these vitamins are stored in the body. **Offer children foods that are a good source of vitamin C every day. Offer children foods that are a good source of vitamin A at least every other day.** Refer to the following list for good food sources of these vitamins.

Good Sources of Vitamin C

Vegetables

- Broccoli
- Brussels sprouts
- Cabbage
- Cabbage
- Cauliflower
- Collards
- Kale
- Okra
- Peppers, sweet, hot, chili
- Snow peas
- Tomatoes
- Tomato paste, puree

Fruits

- Cantaloupe
- Grapefruit
- Guava
- Kiwi fruit
- Lemon
- Mango
- Oranges
- Papaya
- Strawberries
- Tangerines

Juices

- Orange
- Grapefruit
- Tomato
- Vegetable Juice Cocktail
- Fruit Juices Enriched with Vitamin C

Good Sources of Vitamin A

Vegetables

- Bok Choy
- Carrots
- Onion, green
- Parsley
- Pumpkin
- Peppers (hot, chili, red)
- Squash-winter
- Sweet potatoes
- Tomatoes
- Vegetable juices
- Dark, leafy greens
  - (beets, mustard, collard, chicory, chard, kale, endive, turnip)

Fruits

- Apricots
- Cantaloupe
- Mango
- Papaya
- Persimmom (Japanese)

Juices

- Apricot Nectar
- Vegetable Juice Cocktail

Source: Information for this chart was taken from The California Daily Food Guide: Dietary Guidance for Californians, Kenneth W. Kizer, M.D., M.P.H., Director, California Department of Health Services, developed in collaboration with the CA. Dept. of Aging and CA. State Dept. of Education, April 1990.

Special Issue:

Vegetables - Should I Purchase Fresh, Frozen, or Canned ?

Most people assume that fresh vegetables are better nutritionally than frozen or canned. This is not necessarily true. Fresh vegetables do provide more nutrients than canned vegetables. The high temperatures used in canning destroy some vitamins and minerals. In addition, canned vegetables are usually high in sodium. **While canned vegetables are certainly better than no vegetables, if you are choosing between fresh and canned, fresh is the better choice.** However, fresh vegetables are not always better than frozen. Frozen vegetables may contain as many or more vitamins and minerals than the "fresh" product. To a great extent it depends on how fresh the "fresh" product is.

In today's food market you can get almost any vegetable, "fresh," all year round. Vegetables out-of-season in your area are grown in other areas and shipped to your local grocery. Unfortunately, **vegetables start to lose their nutritional value as soon as they are picked.** So vegetables picked green and shipped to your grocery store may lack the nutritional quality that we usually associate with "fresh" produce. **If "fresh" means grown locally and picked recently, then nutritionally "fresh" is probably your best choice. The sooner vegetables can be eaten after being picked, the higher their nutritional value. But if fresh means picked weeks ago and shipped to your local market, they may actually be inferior to the frozen product.** Producers of frozen vegetables usually select the best, pick them at their peak of ripeness, and freeze them immediately. This freezing process has little effect on nutritional quality.

But what about price? Stretching food dollars is a concern for all of us. It is impossible to identify fresh, frozen, or canned as the most for your money in every case. However, there are some general rules.

(1) Vegetables in season are usually a better dollar value than those not in season.

(2) Vegetables in season are usually a better dollar value if purchased fresh, than those same vegetables purchased canned or frozen.

(3) When choosing between fresh and frozen vegetables not in season, frozen is probably the better buy. You can usually purchase frozen vegetables in large bags, and there is almost always a price advantage when you buy large quantities.

As a general rule- buy fresh vegetables when they are fresh- when they are in season, ripe and appear recently picked. Otherwise, buy the frozen vegetables. When you must use canned vegetables, look for the brands with the lowest sodium.

5. AVOID TOO MUCH SUGAR...

In this section you will learn about:

the truth about sugar | page 69
reading labels for sugar content | page 71

A helpful chart is provided on:

the sugar content of selected breakfast cereals | page 78

To learn more, read the supporting information:

determining the sugar content of cereals | page 81

There is also information on special issues:

myths about sugar | page 73
nutritious snacks | page 74
the sugar content of cereals | page 77

The Truth About Sugar

PRIMARY INFORMATION

What Every Family Child Care Provider Should Know

While it is ok for children to have some sugar in their diets, we need to be careful that we do not feed them too much. Too often we are serving foods high in sugar without even realizing it. **There are two major problems with feeding children too much sugar or too many foods high in sugar.**

1. **If children are filling up on sugar or sweet foods, they may not be eating enough of the more nutritious foods needed to meet all of their nutritional requirements.** Reduce the total amount of sweets you offer and serve foods that are naturally sweet, like fresh fruits, which also have other nutritional benefits like vitamins A and C and fiber.

2. **Sugar causes tooth decay.** Tooth decay is not simply a matter of how much sugar is eaten, but how often sugar is eaten and whether or not the food is sticky. The more frequently you eat foods that contain sugar, the greater the risk for tooth decay - especially if sweet foods are eaten between meals and if they stick to your teeth.

Don't make sugary snacks a habit. **Instead of serving high sugar snacks, make snack time another chance to meet the children's nutritional needs.** Serve snacks like fresh fruit or vegetables,cheese or peanut butter, and crackers. Avoid sweet and sticky snacks like candy and dried fruit. When children do consume foods high in sugar, encourage them to brush their teeth afterwards.

The sugar in our diets comes from three major sources.

1. **We add table sugar**, also called sucrose or refined sugar, to some of the foods we eat.

2. **Food manufacturers often add sugar to foods as they are processed.** On food labels the sugar in foods may be called dextrose, sucrose, fructose, glucose, maltose, lactose, corn syrups, corn sweeteners, natural sweeteners, and invert sugars.

3. **Sugar is present naturally in some foods** like pears, bananas and corn.

To avoid too much sugar:

- Use less of all sugars and food containing large amounts of sugar, including white sugar, brown sugar, powdered sugar, raw sugar, honey, and syrups. Examples include soft drinks, candies, cakes, and cookies.

- Remember, how often you eat sugar and sugar-containing food is as important as how much sugar you eat. Try to avoid eating sweets between meals. Snack on fresh fruits or vegetables instead.

- Read food labels for clues on sugar content. Ingredients are listed in order of the amount the product contains. If the name sugar, sucrose, glucose, maltose, dextrose, lactose, fructose, or syrups appears first, then there is more sugar in the product than any other ingredient. (There will be more about this in the special issue block on sugar and cereals.) Choose brands lower in sugar or search for other foods to use in their place.

- Select fresh fruits or fruits canned in their own juice or in light, rather than heavy, syrup. If you do serve fruits packed in heavy syrup, rinse them off before serving.

- Drink water and fruit juice instead of soft drinks, fruit drinks, powdered drinks, and punches. Fruit drinks, powdered drinks, and punches are usually loaded with sugar and soft drinks and have no nutritional value.

- Try reducing the amount of sugar you put in unsweetened drinks.

- Try putting less sugar in your favorite recipes. Reduce the amount a little at a time so you can decide what amount is right for you.

NOTE:

1. **When serving children, do not use artificial sweeteners or foods or diet drinks that contain them.** Many people believe that these chemicals are not good for children. Though we don't know for sure that they are harmful, we do know that **there are other ways to safely lower the amount of sugar in children's diets. Choose the safe, healthy ways and avoid artificial sweeteners.**

2. **Children under 2 should not eat honey or products containing honey, even if the products are baked.** All honey contains botulism spores, an organism that causes food poisoning. **For children under 1 year old, honey can cause severe illness and even death.**

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Reading Labels for Sugar Content

PRIMARY INFORMATION

What Every Family Child Care Provider Should Know

Ingredient Labels

While ingredients labels will not give you the exact amount of sugar a product contains, they can give you a rough idea about the sugar content. Ingredients are listed in order by weight from the greatest to the least. **If sugar or one of the names used for sugar is listed as one of the first three ingredients, or if several names for sugar are listed on the label, the product is probably high in sugar.** In this situation it would be best to search for a low sugar alternative.

These are some of the names used for sugar.

- Sugar
- Sucrose
- Glucose
- Dextrose
- Sorbitol
- Fructose
- Maltose
- Maple syrup
- Lactose
- Mannitol
- Honey
- Corn syrup
- High-fructose corn syrup
- Molasses
- Xylitol

What does the following ingredient label tell you about the sugar content of the food product?

Ingredients: Bleached flour, sugar, partially hydrogenated vegetable shortening, dextrose, water, corn syrup, carob, whey blend, cornstarch, salt, sodium bicarbonate, lecithin, artificial flavorings, and artificial colors.

From the label you can tell that this product contains **three different kinds of sugars: sugar, dextrose, and corn syrup.** These sugars are the second, fourth and sixth ingredients listed. This indicates that **this product is probably high in sugar.**

Nutrition Labels

This nutrition label from a cereal box lists "sucrose and other sugars" under "Carbohydrate Information." Remember: Sugar is a simple carbohydrate. What does this label tell you about the sugar content of the cereal?

Nutrition Information
(Per Serving)
Serving size: 2/3 cup (1 ounce 28.3 grams)
Servings Per Box: 18

	1 oz.	with 1/2 cup skim milk
Calories	90	130
Protein	3g	7g
Carbohydrate	23g	29g
Fat	*	*
Cholesterol	0mg	0mg
Sodium	0mg	60mg

**Contains less than 1 gram.*

Carbohydrate Information:

	1 oz.	with 1/2 cup skim milk
Complex carbohydrates	19g	19g
Sucrose and other sugars	0*	6g
Dietary fiber	4g	4g
Total Carbohydrates	23g	29g

**Less than 8.5 G of naturally occurring sugars*

This cereal is virtually sugar free. If served with milk there are approximately 6 grams of sugar in a serving. This is because the milk contains naturally occurring sugars. This sugar is not the kind of sugar that we are concerned about limiting in our diet.

Special Issue: Myths About Sugar

Much has been written and said about sugar in recent years. Much of it is untrue. This Special Issue Block looks at some of the more common myths about sugar.

1. Sugar and Diabetes:

There is a common belief that sugar causes diabetes. This is incorrect. Too much sugar does not cause diabetes. People with diabetes tend to have high levels of blood sugar for many different reasons. The most common type of diabetes occurs in people who are obese. A family history of diabetes, obesity, and advancing age are among the many contributing factors to diabetes.

2. Sugar and Obesity:

It is true that most sweet foods are also high in calories. However, sweet foods are often high in fat as well. In many cases the majority of the calories in sweet foods come from the fat they contain rather than the sugar. These foods may contribute to some people being overweight; and by eliminating them, these individuals may lose weight. However, one loses weight by reducing total calorie consumption, regardless of the source of the calories. Please note however, that obesity is very complex and is affected by a variety of factors. Calorie intake is only one of those factors.

3. Sugar and Hyperactive Children:

Many people associate sugar with hyperactivity or moodiness. Although some parents and family child care providers insist that this association is real, scientific studies do not support the claim. There is no scientific evidence that eating sugar makes children hyperactive or moody.

4. Sugar Addiction:

Some people believe that individuals can become addicted to sugar. This is not true. It is true that we humans have a natural preference for sweet foods, and perhaps some people would like to believe that an "addiction" explains their over consumption. However, there is no scientific evidence that one can become physically addicted to sugar.

5. Raw Sugar:

There are some people who believe that raw sugar and brown sugar are more nutritious than white table sugar. This is not true. Like white table sugar, raw sugar and brown sugar have no nutritive value.

6. Honey:

Some people believe that honey is better for children than table or white sugar. Honey is not a good substitute for sugar. Not only is honey no more nutritious than other sugars, but for some children, honey can be dangerous. All honey contains botulinum spores, an organism that causes food poisoning. For children under 1 year old, honey can cause severe illness and even death. It should not be served raw or used in preparing foods such as cookies.

Special Issue: Nutritious Snacks

Why are snacks so important for children?

Childhood is a time of rapid growth and development. Seeing that children get an adequate amount of nutrients and calories to support this growth and development is very important. It is difficult for children to get enough calories and nutrients from their meals alone. For this reason, they need nutritious mid-morning and mid-afternoon snacks.

Considerations in Selecting Nutritious Snacks

1. Avoid snack foods that are high in sugar.

Read the food labels. If sugar is listed first, then the food contains more sugar than any other item. And remember, sugar goes by many other names, like sucrose, glucose, maltose, dextrose, lactose, fructose, or syrups.

Cookies, cakes, candies, and soft drinks are obvious high sugar snacks. They also tend to be expensive.

Many cereals are also high in sugar. Check the label on the box. If sugar is the 1st or 2nd ingredient, the cereal contains too much sugar.

Juices can also be misleading. If the label reads "fruit drink" or "punch," avoid it. Choose only juices which say 100% juice on the label, with no sugar added. Labels that say "100% natural" are not necessarily 100% juice.

If you serve canned fruits, choose ones that are packed in fruit juice, water, or light syrup.

2. Avoid snack foods high in fat and salt or sodium.

Most potato chips and corn chips are high in both.

Ice cream is high in fat.

Crackers can also be high in both so choose them carefully. Crackers that are low in fat and salt (sodium) and which make good snacks for children include graham crackers, unsalted saltines, melba toast, matzo, rice cakes, wasa, Rye Krisp, bread sticks, and Zwieback. (See the Special Issue on Choosing Crackers , page 96, for more information.)

3. Make sure you serve foods that are safe for children at their age. Some foods may be too hard for younger children to chew or may cause choking. Do not give small, hard, round foods to infants and young children.

These foods may cause choking in children.

hot dogs
seeds
popcorn
granola
hard round vegetables like carrot sticks
nuts
chips
grapes
raisins and other small fruits

These foods make great nutritious snacks for children.

mild cheeses
crackers
cereal
boiled eggs
fruit slices
yogurt
banana bread
tomato soup
raw vegetables
peanut butter
fruit juice
milk
applesauce
small sandwiches
seedless grapes cut in half
muffins

Here are some serving suggestions.

Crackers go well with both peanut butter and cheese. Serve an assortment and let the children choose.

Dry cheerios make a great snack for a toddler learning to feed him or herself.

Cut up pieces of fruit and put them in plain yogurt. Serve it as yogurt and fruit, or add a little milk, mix it in the blender, and you have a yogurt fruit shake.

Make an open faced sandwich with peanut butter or cheese and bread. Let the children decorate it with fruit pieces, raisins or shredded carrots.

Use fruit juice to make homemade frozen treats.

Melt cheese on a tortilla, cut in quarters, and serve. Make sure the cheese is not too hot.

Make small pancakes, spread with peanut butter or applesauce, and roll them up.

Make "dinosaur eggs." Boil eggs and crack but do not peel them. Place them in a bowl of water mixed with food coloring (no vinegar) and put them in the refrigerator overnight. Serve them to the children the next day. Just let them peel and eat. The coloring effect will surprise and delight them.

Cut vegetables and fruits into bite size pieces and serve them plain or serve them with a dip or spread. For example:

> Stuff celery sticks with peanut butter or spread peanut butter on apple slices. Top with a few raisins.
>
> Make a dip for vegetables by adding herbs to cottage cheese and mixing it in the blender. Try spreading this dip on a lettuce or spinach leaf and rolling it up.

Be creative. Think of your own fun recipes using the foods listed on the previous page.

Special Issue: The Sugar Content of Cereals

Many cereals contain so much sugar that they might be more appropriately called candy. This can be especially true of the cereals marketed to children. For example, refined sugars make up 40 to 60 percent of cereals such as Cap'n Crunch, Trix, Froot Loops, Fruity Marshmallow Krispies and Ghostbusters.

There are many other cereals that are mainly sugar, and new ones are always being placed on the market. Check the contents listed on the side panel of the cereal box. If sugar is the first ingredient listed, then the product contains more sugar than any other ingredient. And remember, **there are many other names for sugar, such as honey, sucrose, glucose, maltose, dextrose, lactose, fructose, corn sweeteners, and corn syrups.** Don't let the names fool you. It is all sugar. These cereals are not recommended. They promote a "sweet tooth" and encourage poor eating habits. Further, they are expensive. Those of you enrolled in the Child and Adult Care Food Program will not be reimbursed for serving them.

It is almost impossible to keep an up-to-date list of the different cereals and how they rate in terms of sugar content. However, the following "rule of thumb" will help you select a nutritious cereal. There are exceptions to this list. For example, some cereals have only two ingredients. Although sugar may be listed as the second ingredient, the sugar content may not actually be that high. For a more accurate measure of sugar content, use the formula presented in the supporting information on Determining the Sugar Content of Cereal, page 81.

- **Sugar, or one of the other words meaning sugar, listed as the 1st ingredient:**
  Not Recommended
  Not Accepted by the Child and Adult Care Food Program

- **Sugar, or one of the other words meaning sugar, listed as the 2nd ingredient:**
  Not Recommended
  Accepted by the Child and Adult Care Food Program

- **Sugar, or one of the other words meaning sugar, listed as the 3rd ingredient:**
  Accepted by the Child and Adult Care Food Program

- **Sugar, or one of the other words meaning sugar, listed as the 4th, 5th, etc. ingredient, or not at all.**
  Highly Recommended
  Accepted by the Child and Adult Care Food Program

A Guide to Breakfast Cereals

RECOMMENDED
(0-10% sugar by weight)

sugar* per 1 ounce serving

Brand	Grams
Cheerios	0
Shredded Wheat	0
Spoon-Size Shredded Wheat	0
Rice Chex	2
Corn Flakes**	2
Nutri-grain Wheat	2
Nutri-grain Nuggets	2
Post Toasties	
Kix	3
Corn Chex	3
Wheat Chex	3
Crispix	3
Rice Krispies**	3
Grape Nuts	3
Special K	3
Product 19	3
Triples	3
Wheaties	3

** includes in-store brands

ACCEPTABLE
(11-20% added sugar by weight)

sugar* per 1 ounce serving

Brand	Grams
Kelloggs Kenmei Rice Bran	4
Post Great Grains, Double Pecan	4
Kelloggs All Bran	5
Team Flakes	5
Double Chex	5
In-Store 40% Bran	5

NOT RECOMMENDED
(21-30% added sugar by weight)

sugar* per 1 ounce serving

Brand	Grams
Life	6
Crunchy Corn Bran	6
Cinnamon Life	6
Post Fruit 'n Fiber	6
Multi-Bran Chex	6
Nature Valley 100% Natural Oat	6
Quaker Oat Squares	6
Quaker Oat Bran	6
Kellogg's Oat Bake (Honey Bran)	6
Oatmeal Crisp	6
Post Oat Flakes	6
Kellogg's Raisin Squares	6
Kellogg's Oat Bran**	7
Kellogg's Bran Buds	7
Post Raisin Bran	7
Nutri-Grain Almond Raisin	7
Kellogg's Craklin Oat Bran	7
Kellogg's Double Dip Crunch	8
Basic 4	8
General Mills Raisin-Nut Bran	8
Frosted Mini-Wheats	8

** includes in-store brands

* includes sugar (sucrose), corn syrup, corn sweetener, high fructose corn syrup, honey, molasses, fructose, glucose, dextrose, maltodextrin, and levulose.

A Guide to Breakfast Cereals (Continued)

The following cereals are not recommended. In some cases, a Child and Adult Care Food Program Sponsor may not reimburse you for serving them. If you plan to serve any of these cereals, check with your Child and Adult Care Food Program Sponsor beforehand to see if you will be reimbused.

NOT RECOMMENDED - MAY NOT BE REIMBURSABLE
(over 30% added sugar by weight)

Brand	Grams sugar* per 1 ounce serving
Honey Nut Crunch	9
Just Right	9
Cinnamon Toast Crunch	9
Cinnamon Toast Crunch "Juniors"	9
Kellogg's Lightly Frosted Bran	9
Honey Nut Cheerios	10
Apple Cinnamon Cheerios	10
Oatmeal Raisin Crisp	10
Cocoa Krispies	11
Kellogg's Cinnamon Mini Buns	11
Kellogg's Frosted Flakes	11
Oh's Honey Graham	11
Current Cereals Promoted to Children, for example, Addam's Family, Ninja Turtles, Cabbage Patch, G.I. Joe	10-11
Alpha Bits	12
Kellogg's Fruitful Bran	12
Fruity Pebbles	12

Brand	Grams sugar* per 1 ounce serving
Kellogg's Raisin Bran***	12
Corn Pops	12
Captain Crunch	12
Captain Crunch with Crunch Berries	12
Peanut Butte4r Crunch	12
Lucky Charms	12
Mueslix	12
Nut'n Honey	12
Trix	12
Cookie Crisp	13
Froot Loops	13
Honeycomb	14**
Apple Jacks	14**
Marshmallow Alpha Bits	14**
Total Raisin Bran	14**
Super Golden Crisps	15**
Honey Smacks	15-16**

** Product is at least 50% sugar
*** includes in-store brands

* includes sugar (sucrose), corn syrup, corn sweetener, high fructose corn syrup, honey, molasses, fructose, glucose, dextrose, malto-dextrin, and levulose.

Source: This breakfast cereal guide was developed by the Child Care Food Program, Contra Costa Child Care Council, Concord CA.

Determining the Sugar Content of Cereal

Supporting Information

For the Provider Who Wants To Know More

The information provided in a preceding special issue block gives a general guideline for selecting a low-sugar cereal. It will work in most cases. **Sometimes, however, cereal labels are written in a way that seems to hide the amount of sugar in the product. Rather than using only one kinds of sugar and listing it on the label one time, manufacturers use a combination of many different kinds of sugar. These sugars are all listed on the label separately by their different names.** For example, the term sugar might be the 3rd ingredient listed on the label. But if you were to read further, you might find several other names for sugar listed, like maltose, and honey. **If you were to add up the amounts of all the different kinds of sugar listed, the sugar content might be much higher than you first thought.**

Many of you will want to stick with the simpler method for judging cereals in terms of their sugar content. That method works well in comparing cereals, especially if you keep in mind the different names for sugar that might appear on the label.

However, **if you would like to determine more accurately the amount of sugar in a particular cereal, use the following formula.**

- A typical individual serving size is about 1 ounce. The ingredients listed on the side panel should tell the number of ounces per serving size. Each ounce has 28 grams.

- From the list of ingredients, find out how many grams of sucrose or sugar there are per ounce (or per 28 grams).

- Then divide the number of grams of sucrose in a serving by 28 grams (the number of grams of cereal in a serving.) This will give you the percentage of sugar in the cereal.

EXAMPLE: 1 oz. = 28 grams
? grams of sucrose per ounce
? grams sucrose divided by 28 grams in serving = % of sucrose or sugar in cereal
(Corn Bran has 6 grams of sucrose per ounce.)
6 grams divided by 28 = .21 = 21% sugar.

When you use this formula to determine the sugar content of cereals, **use the following as a guideline for evaluating cereals:**

- **Cereals With 0-10% Sugar Added**
  Recommended
- **Cereals With 11-20% Sugar Added**
  Acceptable
- **Cereals With 21-30% Sugar Added**
  Not Recommended
- **Cereals With Over 30% Sugar Added**
  Not Recommended,
  May Not Be Reimbursable

6. AVOID TOO MUCH SALT AND SODIUM. . .

In this section you will learn about:

limiting salt and sodium	page 85
reading food labels for sodium content	page 91

There is a helpful chart on:

the sodium content of selected foods	page 87

To learn more, read the supporting information:

understanding terms for reduced sodium	page 101

There is also information on special issues:

seasoning without salt	page 89
choosing cheese wisely	page 94
choosing crackers	page 96
high blood pressure	page 102

Limiting Salt and Sodium

PRIMARY INFORMATION

What Every Provider Should Know

While it is true that our bodies need sodium (salt), most Americans get too much. **The average American adult consumes between 8,500 and 13,500 mgs. of salt per day, or 4 to 6 teaspoons.** The National Research Council of the National Academy of Sciences suggests that a **"safe and adequate" amount of sodium for adults is between 1,100 milligrams (mgs.) and 3,300 milligrams (mgs.) daily. This would be equal to between about one-half and one and one-half teaspoons of salt a day.** Although there is no established amount of salt recommended for children, we can assume that they should eat even less than adults.

High sodium diets are one of the risk factors for high blood pressure, and may aggravate high blood pressure once it exists. Although children seldom suffer from high blood pressure, children do learn food preferences which contribute to high blood pressure as they grow older. A likeness for salty foods is one such habit. It will be much easier for children to become accustomed to low sodium (salt) foods when they are younger, than when they are older and need to reduce sodium because of a health problem. In addition, **a low sodium diet throughout life can help an individual avoid high blood pressure altogether.**

Table salt is composed of two major components, sodium and chloride. One teaspoon of salt contains 2,000 milligrams (mgs.) of sodium. Sodium is also found in many of the ingredients and additives used in processing foods, like monosodium glutamate (MSG), a flavor enhancer, and sodium benzoate, a preservative. **Any food ingredient with sodium in the name contains sodium.** Other sources of sodium include baking soda, baking powder, and sodium saccharin, the artificial sweetener more commonly called saccharin.

Salt, or more specifically the salt shaker, is by far the major source of sodium in our diets. This is why most of the recommendations for avoiding or limiting sodium, focus on avoiding or limiting salt.

To lower your consumption of sodium, use less table salt when you prepare foods, and avoid prepackaged foods with high salt or sodium content. Some prepackaged foods that are high in sodium, like potato chips, taste salty. Other foods high in sodium, like frankfurters, do not. Sodium occurs naturally in some foods and in others it is added as a preservative or curing agent. Foods with a long shelf life are often high in sodium. **You cannot rely on taste to determine the sodium content of foods. Read the food labels.**

The lists on pages 87 and 88 give the approximate sodium content of some foods commonly found on family child care provider menus.

Suggestions For Lowering Sodium (Salt) Intake:

The following suggestions will help you to lower the sodium in your diet and in the meals and snacks you serve children.

- Learn to enjoy the flavors of unsalted foods.

- Cook without salt or add as little salt as possible. If you typically use lots of salt, try cutting back gradually. You will become accustomed to less salt over time.

- If you must add salt, it is best to do so after the food is cooked, not during cooking. Food will taste more "salty" when salt is sprinkled on it, rather than when it is cooked into it. Try to add as little as possible and taste food before salting.

- Don't put the salt shaker on the table. It makes it too easy to pour on the salt.

- Try using herbs, spices, and lemon juice instead of salt to add flavor to foods.

- Limit your intake of salty foods such as potato chips, pretzels, salted nuts and popcorn, condiments (soy sauce, steak sauce, garlic salt), pickled foods, sandwich meats, frankfurters, some cheeses, and some canned vegetables, soups, and stews.

- Try the versions of processed foods like soups, salad dressings, and sauces, that are labeled "low sodium." (See page 101 for information on labels for low sodium products.)

- Read the food labels carefully to determine the amounts of sodium. (See page 91 for more on reading food labels for sodium content.) Look for alternatives to foods with lots of sodium, or, if one brand has less sodium than another, choose it.

Sodium Content of Selected Foods

Food	Amount	Sodium Content
Meats, Poultry, and Fish		
dried beef	1 ounce	1,219 mg
hotdogs or frankfurters	1	639 mg
"all meat" hotdogs	1	401 mg
ham (cured)	1 ounce	371 mg
lunch meats	1 slice	250-380 mg
Bologna	1 slice	220 mg
Bratwurst	1 ounce	158 mg
Sausages	1 link	168 mg
Fresh meat, poultry, finfish	3 ounces	less than 90 mg.
Milk, Cheese and Cheese Products :		
Milk	1 cup	120-160 mg.
Pizza (commercial)	1 4"X 6" slice	701 mg
Lasagna (commercial)	1 portion	434 mg
Macaroni and cheese (homemade)	1 ounce	408 mg
Cottage Cheese	1/2 cup	450 mg
Natural Cheeses	1 ounce	220-900 mg
Processed Cheese and Cheese Spreads	1 ounce	350-450 mg.
Bread, Cereals, and Grain Products:		
Cooked cereal, pasta, rice, (unsalted)	1/2 cup	less than 5 mg.
Ready-to-eat cereal	1 ounce	100-360 mg.
Bread, whole grain or enriched	1 slice	10-175 mg.
Biscuits and muffins	1	170-390 mg.
Vegetables:		
Fresh or frozen vegetables (cooked without added salt)	1/2 cup	less than 70 mg.
Vegetables, canned or frozen with sauce	1/2 cup	140-460 mg.
Fruits:		
Fruits fresh, frozen, or canned	1/2 cup	less than 10 mg.

Sodium Content of Selected Foods

Food	Amount	Sodium Content
Fats and Dressings		
Oil		none
Vinegar	1 Tbsp.	less than 6 mg.
Prepared salad dressings	1 Tbsp.	80-250 mg.
Unsalted butter or margarine	1 teaspoon	1 mg.
salted butter or margarine	1 teaspoon	45 mg.
salt pork, cooked	1 ounce	360 mg.
Condiments		
Catsup, mustard, chili sauce, tartar sauce, steak sauce	1 Tbsp.	125-275 mg.
Soy sauce	1 Tbsp.	1,000 mg.
Salt	1 teaspoon	2,000 mg.
Snack and Convenience Foods		
Canned and dehydrated soups	1 cup	630-1,300 mg.
Canned and frozen main dishes	8 ounce serving	800-1,400
Unsalted nuts and popcorn	1 ounce	less than 5 mg.
Salted nuts, potato chips, corn chips	1 ounce	150-300 mg.
Deep-fried pork rind	1 ounce	750 mg.
Pickles (dill)	1 pickle	928 mg.
Olives	4 olives	323 mg.

Special Issue: Seasoning Without Salt

There are many different mixtures of herbs and spices that will allow you to enhance the flavor of your foods, without adding salt (sodium). Below are recipes for three seasoning blends that you can make at home. Blend them thoroughly. Put some of the seasoning blend in a shaker to be placed on the table. Store the extra in a tightly covered glass container.

Seasoning Blend #1

This is a good "all-purpose" seasoning for both vegetables and meats.
Also try it on broiled tomatoes.
(Recipe makes approximately 1/2 cup.)
2 tablespoons dry mustard
2 tablespoons onion powder
2 tablespoons paprika
2 teaspoons garlic powder
2-3 teaspoons white pepper
2 teaspoons ground thyme
1/2 teaspoon ground basil

Seasoning Blend #2

Use this all-purpose seasoning to pep up chicken, hamburger and tomato based dishes.
(Recipe makes approximately 3/4 cup.)
4 tablespoons onion powder
4 tablespoons parsley flakes, crushed
2 tablespoons garlic powder
2 tablespoons paprika
1 tablespoon ground basil

Italian Seasoning Blend

Use this seasoning blend in pasta sauces or Italian meatballs.
(Recipe makes approximately 1/2 cup.)
4 tablespoons dried parsley, crushed
4 teaspoons dried minced onion
1 teaspoon ground oregano
2 teaspoons dried basil, crushed
1 teaspoon ground thyme or marjoram
2 teaspoon celery seed
1 teaspoon garlic powder
1/4 teaspoon black pepper

Reading Labels for Sodium Content

PRIMARY INFORMATION

What Every Family Child Care Provider Should Know

The average adult should limit his or her sodium consumption to between 1,100 and 3,300 milligrams a day. One way to limit sodium is to choose the lower sodium food products from your grocery store shelves. In order to do this, you need to know how to determine sodium content from reading the food labels.

Labels from two different products are used to demonstrate how to read labels for sodium content. Example 1 gives the nutrition and ingredient labels from a can of vegetable soup. Example 2 gives the nutrition and ingredient labels from a can of spaghetti in tomato sauce.

Nutrition Labels

Nutrition labels tell you how many milligrams of sodium the product contains per serving. As is the case anytime you read nutrition labels, **be sure to check the serving size.** Serving size is determined by the food manufacturer and can vary from one product to another. You will need to ask yourself **how much of the product you plan to eat or serve.** A product that is relatively low in sodium per serving may provide you with a lot of sodium if you really consume two servings.

Ingredient Labels

Ingredient labels give you the ingredients of the product with the ingredient present in the largest quantity by weight first, and the ingredient present in the smallest quantity by weight last. When you read ingredient labels for sodium content, keep in mind all of the different **ingredients that contain sodium.** These are:

- **salt, including seasoning salts like onion and garlic salt;**
- **any ingredient with sodium as part of its name, for example, monosodium glutamate and sodium benzoate;**
- **baking powder, baking soda, and saccharin.**

Example 1: Vegetable Soup (made with beef stock)

Nutrition Label:
Nutrition information per serving

Serving size	4oz condensed (8oz as prepared - 226g)
Servings per container	2 1/2
Calories	90
Protein (grams)	3
Carbohydrate (grams)	14
Fat (grams)	2
Cholesterol	less than 5 mg/serving
Sodium	830mg/serving
Percentage of U.S. Recommended Daily Allowances (U.S.RDA)	
Protein	4
Vitamin A	40
Vitamin C	6
Thiamin	2
Riboflavin	2
Niacin	2
Calcium	2
Iron	2

VEGETABLE SOUP (made with beef stock)
Ingredients: Beef stock, tomatoes, potatoes, carrots, peas, green beans, corn, high fructose corn syrup, enriched alphabet macaroni, onions, celery, *salt*, potato starch, vegetable oil, yeast extract and hydrolyzed vegetable protein, *monosodium glutamate*, beef fat, dehydrated garlic, caramel color, natural flavoring and oleoresin paprika.

Canned soups, like this one, are usually high in sodium. According to the nutrition label, this soup would provide you with 830 mg of sodium per serving. The serving size is 4 ounces. If mixed with an equal amount of water as the directions specify, a serving would be 8 ounces (1 cup). If you use less water, the sodium content is higher. How much soup would you eat or serve as part of a meal. Do you really only have one cup?

The ingredient label shows that there are two ingredients in this soup which contain sodium. They are salt and monosodium glutamate. Salt is the 12th ingredient listed; monosodium glutamate is the 17th ingredient listed. It could be somewhat misleading to judge the sodium content of this food item simply from reading the list of ingredients. Neither salt nor monosodium glutamate are listed near the top. However, ingredients are listed by weight. One teaspoon of salt weighs very little yet it contains 2,000 milligrams of sodium. **In determining sodium content, it is best to read the nutrition labels.**

Example 2: Spaghetti in Tomato Sauce: Cholesterol Free!

Nutrition Label:
Nutrition information per serving

Servings per container	1
Calories	200
Protein (g)	8
Carbohydrate (g)	26
Fat (g)	7
Sodium (mg)	900
Cholesterol	0

Percentage of U.S. Recommended Daily Allowance

Protein	10
Vitamin A	5
Vitamin C	5
Thiamine	10
Riboflavin	5
Niacin	10
Calcium	2
Iron	5

Spaghetti in Tomato Sauce
Ingredients: Tomatoes, water, cooked enriched spaghetti, high fructose corn syrup, salt.

This food item illustrates one of the difficulties in selecting foods that will provide us with a healthy diet. This food item is labelled "cholesterol free." **While it is cholesterol free, it is not low in sodium. Salt is the only ingredient listed which contains sodium, and it is the last ingredient listed. This could lead you to believe that the food product may be low in sodium. However, when you read the nutrition label, you learn otherwise. One serving of this spaghetti in tomato sauce would give you 900 milligrams of sodium.**

Always read the labels, especially the nutrition labels. You cannot assume that a food product good for you in some respects, is good for you in all respects. And you can't determine sodium content from taste.

Whether or not you select this product will depend on the other foods in your diet. If high cholesterol is a problem for you and for the most part, you have a diet low in sodium this food may be a wise selection. Reading the label will help you to make the decision that is best for you and the children you are feeding.

Special Issue: Choosing Cheese Wisely

There are many different kinds of cheeses. These cheeses not only differ in taste, color, and texture, but they also differ in the amounts of fat and sodium they contain. Although virtually all cheeses contain significant amounts of fat and sodium, some cheeses have more than others. In addition, some cheeses may be relatively high in fat but relatively low in sodium, or vice versa. The cheese that is right for you or your children will depend upon individual dietary needs and concerns, as well as the fat and sodium content of the other foods consumed.

The chart on the next page ranks cheeses by both their fat and sodium contents.

A Guide to The Fat and Sodium in Cheese

FAT SODIUM	**Low Fat** Less than 6 grams per ounce	**Medium Fat** 6-8 grams per ounce	**High Fat** 8-10 grams per ounce
Low Sodium Less than 150 milligrams per ounce	Unsalted, dry-curd cottage cheese (1/2 cup) Part-skim mozzarella Part-skim ricotta (1/4 cup)	Whole-milk mozzarella Nuefchatel Swiss	Low-sodium cheddar Cream Cheese Gruyere Whole-milk ricotta (1/4 cup)
Medium Sodium 150-225 milligrams per ounce		Brie Tilsit	Brick Caraway Cheddar Cheshire Colby Gjetost Monterey Jack Muenster Port-Salut
High Sodium 225-350 milligrams per ounce	*Low-fat, processed cheese products *Skim processed cheese	Camembert Edam Feta Gouda Limburger Provolone Romano Processed American cheese food	
Very High Sodium 350-550 milligrams per ounce	Low-fat or cream cottage cheese (1/2 cup)	Parmesan (hard) Processed cheese spread Processed Swiss cheese Processed Swiss cheese food	Processed American cheese Blue Parmesan (grated) Roquefort

Source: This chart was taken from Heart Briefs, The American Heart Association, Almeda County Chapter, Oakland, CA.

Special Issue: Choosing Crackers

Selecting a cracker can be a real challenge. Some of the lower fat crackers are high in sodium, and some of the lower sodium crackers are high in fat. Depending upon your dietary concerns, you may be searching for a cracker that is low in both.

Very few brands of crackers have nutrition labels to tell you how much sodium (salt) or fat a cracker contains. Instead, most brands have ingredient labels that only tell you whether or not a product contains sodium (salt) or fat. The chart on the next page ranks different crackers by the grams of fat they contain. The milligrams of sodium they contain are provided in the column to the right. Use this chart to help you select the best cracker for you and your family and for the children in your care. Remember these basic guidelines for fat and sodium intake:

Recommended fat consumption: No more than 30% of calories over a period of a few days. (Children under 2 need more fat than adults. Do not limit their fat intake.)

Recommended sodium (salt) consumption: Adults should not consume more than 2400 milligrams a day. Children should probably consume less.

The Fat and Sodium Content of Selected Crackers Per 1/2 Ounce

Fat: 0-1/2 Gram (0-7% of Calories) **Calories: 40-50**	**Sodium** (milligrams)
Manischewitz Whole Wheat Matos with Bran (1/2)	0
Keebler Melba Toast, Long (3)	15
Ryvita High Fiber Crispbread (2)	20
Ryvita Rye Crispbread (2)	40-70
Wasa Hearty Rye Crispbread (1)	70
Wasa Golden Rye Crispbread (1 1/2)	73
Wasa Lite Rye Crispbread (2)	80
Ryvita High Fiber Crackerbread (3)	81
Ry-Krisp Natural (2 triples)	125
Fat: 1 Gram (3-23% of calories) **Calories: 40-70**	
Venus Salt-Free Bran or Corn (5)	0
Carr's Wheatmeal or Whole Wheat (2)	15
Ryvita Sesame Rye Crispbread (2)	20
Wasa Sesame Crispbread (1 1/2)	53
Ryvita Original Wheat Snack Bread (3)	60
Wasa Breakfast Crispbread (1)	65
Red Oval farms Stoned Wheat Thins with 50% Less salt (4)	80
Wasa Fiber Plus Crispbread (1 1/3)	86
Norseland Original Rye Finn Crisp (1)	95
Red Oval Farms Stoned Wheat Thins (4)	97
Red Oval Farms Stoned Rye (4)	104
Venus Oat Bran or Wheat (5)	106-113
Sunshine Krispy Unsalted Tops (5)	120
Sunshine Krispy Saltines (5)	210

The number in parentheses following each cracker name represents the number of crackers that weigh roughly 1/2 ounce.

Fat: 2 Grams (26%-36% of Calories)	**Sodium** (milligrams)
Calories: 50-70	
Keebler Waldorf Sodium-Free (4)	0
Nabisco Low Salt triscuits (3)	35
Wasa Sesame Wheat crispbread (1)	65
Nabisco Triscuits (3)	75
Nabisco Wheat'n Bran Triscuits (3)	75
Keebler Unsalted Top Zesta Saltines (5)	88
Nabisco Uneeda Unsalted Tops (3)	100
Nabisco Whole Wheat Saltines (5)	130
FFV Sesame Crisp Wafers (4)	140
FFV Ham and Cheese Crispy Wafers (7)	160
Ry-Krisp sesame (2 triples)	160
Keebler Zesta Saltines (5)	175
Nabisco Premium Saltines (5)	180
FFV Cheddar Thins or Double Ched. (7)	220
Fat: 3 Grams (33-45% of Calories)	
Calories: 60-85	
Carr's Table Water King Size (1 1/2)	15
Nabisco Low Salt Wheat Thins (8)	60
Nabisco Low Salt Waverly (4)	80
Pepp Farm Cheddar Goldfish (26)	92
Hain Cheese or Vegetable (6)	98
Pepp Farm Goldfish Cheese Thins (4)	110
Keebler Toasted Sesame or Rye (4)	114-117
Keebler Toasted Wheat (4)	120
Nabisco Wheat Thins (8)	120
Pepp Farm Parmesan Goldfish (23)	128
Nabisco Sociables (6)	130
Nabisco Wheatsworth (4)	135
Pepp Farm Hearty Wheat (3)	135
Sunshine America Heritage Wheat (4)	135
Keebler Wholegrain Wheat or Club (4)	138-144
Pepp Farm Cracked Wheat (3)	150
Dare Cabaret (4)	156
Dare Breton or Vivant (3)	138-159
Nabisco Waverly (4)	160
Nabisco American Classic Cracked Wheat (4)	170
Nabisco Better Cheddars 'N Onion (10)	220
Nabisco Cheese Wheat Thins (9)	220

The number in parentheses following each cracker name represents the number of crackers that weigh roughly 1/2 ounce.

Fat: 4 Grams (45- 54% of Calories)	**Sodium** (milligrams)
Calories: 65-80	
Carr's Croissant Crackers (3)	58
Nabisco Low Salt Ritz (4)	60
Nabisco Low Salt Better Cheddars (10)	65
Pepp Farm Regular or Pizza Goldfish (23)	92
Nabisco Vegetable Thins (7)	100
Keebler Town House (4)	109
Nabisco Escort (3)	110
Nabisco Ritz (4)	120
Nabisco Better Cheddars (11)	130
Sunshine Cheez-It (12)	135
Nabisco Cheese Ritz Bits (22)	150
Sunshine Amer. Heritage Cheddar (5)	150
Sunshine Amer. Heritage Parmesan (4)	180
Sunshine Wheat Wafers (8)	190
Nabisco Cheese TID-BITs (16)	200
Nabisco Better Cheddars N' Bacon (10)	210
Fat: 5 Grams (56% of Calories)	
Calories: 80	
Sunshine Hi-Ho Deluxe (4)	125
Nabisco Nutty Wheat Thins (7)	250

The number in parentheses following each cracker name represents the number of crackers that weigh roughly 1/2 ounce.

Source: This chart was taken from the October, 1989 issue of Nutrition Action Healthletter, a publication of the Center for Science in the Public Interest, 1875 Connecticut Ave., N.W., Suite 300, Washington D.C., 20009-5728, (202) 667-7483.

Understanding Terms for Lowered Sodium

Supporting Information

For the Provider Who Wants To Know More

Many people today are concerned about limiting the sodium in their diets. As a result, food manufacturers are producing food products which contain less sodium than before. The food labels used to distinguish these lower sodium foods can be misleading and confusing.

The Food and Drug Administration has tried to make sodium labels a little easier to understand by developing standard meanings for some of the terms we see on the labels. **Here are those standard definitions for terms used to indicate less sodium.**

Reduced Sodium:
The food item has 75% less sodium than the food it replaces.

Low Sodium:
The food item has a maximum of 140 milligrams (mgs.) of sodium per serving.

Very Low Sodium:
The food item has no more than 35mg of sodium per serving.

Sodium-Free:
The food item has less than 5mg of sodium per serving.

Special Issue: High Blood Pressure

About one in four adults in the United States will develop high blood pressure. Currently there is no sure way to predict exactly who these people will be. However, researchers have identified certain factors that increase a person's risk to develop high blood pressure. High sodium intake, family history, and obesity are three such factors. In addition, researchers have found that African-Americans are more likely to develop high blood pressure than Caucasians.

Lowering sodium intake will usually help people at risk avoid developing high blood pressure. It may also help lower blood pressure for those who have already developed it.

Have your blood pressure checked. Many pharmacies and some grocery stores now have equipment that will allow you to check your blood pressure for free. This equipment will not only read your blood pressure, but will tell you if it is below normal, normal, or above normal. In addition, the Red Cross and other health organizations frequently sponsor health fairs where free blood pressure checks are done. Blood pressure checks are quick and painless.

If you have not recently checked your blood pressure, do so.

If your blood pressure is high, consult a doctor about diet and medication.

If your blood pressure is normal, help keep it that way:

- **maintain a healthy weight,**
- **exercise regularly,**
- **use less salt and sodium.**

CHAPTER 3

CHANGING YOUR DIET: MAKING THE DIETARY GUIDELINES WORK FOR YOU

INTRODUCTION . . .

In the Introduction you will read about:

the purpose for changing your diet | page 2
barriers to change | page 2

This manual was made possible by an educational grant from Nestle USA, Inc. to Save The Children Child Care Support Center.

Now that you have a basic understanding of the dietary guidelines, the next step is to put that information to use by following the dietary guidelines in preparing meals and snacks. We don't expect, however, that you remembered everything that you learned about each dietary guideline. **When you have questions or are not sure about a guideline, refer back to the information provided in the previous chapter.**

The information in this chapter will help you to:

1. **Evaluate your diet** and the foods you serve in terms of the dietary guidelines
2. **Set your goals** or decide what changes you wish to make in your diet
3. **Develop a plan** for reaching your goals or making those changes.

However, before you begin this process, it is important that you understand the overall purpose of changing your diet, as well as some basic information about how to be successful in making changes.

The Purpose of Changing Your Diet

The purpose of changing your diet is improvement, not perfection. As a family day care provider with many responsibilities and duties, it would be not only unwise, but impossible for you to focus all your energies on feeding the children. Feeding is very important, but there are also many other important tasks that you must perform. In addition, perfection is impossible. You may be great but you are still only human. That means that occasionally you will be just too tired, too busy, or too tempted by not-so-nutritious foods to serve the most nutritious meals or snacks. Know ahead of time that you will occasionally go back to your old not-as-nutritious ways of eating and cooking. **Allow yourself to backslide a little, but keep aiming toward improvement.** And give yourself credit for making the effort.

A second point to remember is that **the dietary guidelines apply to diets as a whole, not to any particular food or meal, or even to a day's meals. Not every food you serve, or meal or snack you serve, will fit these guidelines.** As one example, think about birthday cakes. They are usually high in fat and sugar and offer few nutrients. There are ways in which you can change your recipe for birthday cake that will make it more nutritious, or you could serve a more nutritious food to celebrate a birthday. Both of these are good ideas. However, the occasional birthday cake is not our biggest concern when we attempt to change our diets. Most of us do not eat birthday cakes often enough for the more nutritious recipe to make a big difference in our overall diets.

The changes that will make the biggest difference in our diets are usually the small changes in the foods served often. Every meal might not fit the guidelines perfectly, but if overall you are reducing fat, sugar, and salt, serving a larger variety of foods, and serving more vegetables and fruits, you are making dietary changes that are nutritionally important. These are the kinds of changes that should be the focus of your energy.

Barriers to Change

It might just be human nature, but one of the first things most of us do when we think about change is to think of all of the reasons why we can not or should not change. So before we go any further, let's address **5 common reasons people give for resisting changes in their diets. Once we put these excuses to rest, we can move on to the task of making change successful.**

Reason Number 1: I have cooked and eaten this way all my life. Why should I change now?

The Response:

- We now know that 6 out of the 10 major diseases in the United States, including heart disease and high blood pressure, are diet related. Improving your diet may improve your health or lower your risk of developing a diet related disease. Providing children with a healthy diet not only has a positive impact on their health while they are young , but it will also influence their food preferences and eating habits throughout their lives.

Reason Number 2: I'm on a tight budget. Won't this new way of eating cost more?

The Response:

- **No.** Let's look briefly at each dietary requirement to answer this question.

1. Eat a variety of foods.
The cost of increasing variety depends on what new foods you add to your diet. There is certainly no reason why increasing variety means increasing cost.

2. Maintain a healthy weight.
The major cause of obesity among children is lack of exercise. Exercise is free. Special diet programs are sometimes expensive, but they are not usually recommended for children or adults. The best way to maintain a healthy weight is to eat a healthy diet and to get plenty of exercise.

3. Choose a diet low in fat, saturated fat, and cholesterol.
There are several ways to limit your fat, saturated fat, and cholesterol intake. Some of them are more costly, but you need not choose those ways. Eating more non-meat sources of protein, like dry beans and grains, is a good way to reduce both the fat in your diet and your grocery expenses.

4. Eat plenty of vegetables, fruits, and grain products.
Eating more vegetables, fruits, and grain products need not be more expensive either. Most vegetables and fruits are relatively inexpensive. Grains also tend to be inexpensive. If you are using grain as a protein substitute, and therefore using less meat, you will save money.

5. Avoid too much sugar.
Sweet snacks, desserts, and cereals tend to be expensive. In most cases the more nutritious snacks like fresh fruits and vegetables, crackers, and cheese are cheaper.

6. Avoid too much salt or sodium.
Some processed foods that are labeled "low-sodium" are more expensive than their higher sodium versions. You don't have to purchase these to lower your sodium intake. In some cases you may choose to; in other cases you may choose from the many other options for lowering your sodium intake. For example, rather than buying canned vegetables, buy frozen vegetables. These are no more expensive, and if you buy the larger bags of frozen vegetables, you will probably save money.

Reason Number 3: It takes too much time to prepare healthful foods.

The Response:

- It should not take any more time to prepare a healthy meal . You may need to invest a little extra time initially to learn things like new ways to prepare foods and how to read food labels, but we think that the benefits will be worth the investment.

Reason Number 4: I don't want to give up my favorite foods. I doubt my family and the children I care for will like this new diet, and I probably won't like it either.

The Response:

- First, you do not have to give up your favorite foods to improve your diet. There are other options, like eating them less often or eating smaller portions. Second, it seldom takes a radical change in your diet to improve its nutritional quality. Some of the changes you make in recipes and meals will not even be noticed. However, if you are introducing noticeable changes in meals or recipes, these suggestions will help you be successful.

    - Introduce new foods or recipe changes slowly. Don't serve a meal in which every food is new or prepared differently.

    - Involve children in the selection and/or preparation of new foods.

    - Don't force diners to eat all of the new food. Just encourage them to taste it.

    - Don't bribe diners by saying things like "if you eat all of the new food, you'll get dessert." This emphasizes one food over another.

    - Don't get discouraged. You may have to offer a food or recipe several times before people begin to like it.

You will have to judge for yourself, based on what you know about the individuals you cook for, how to approach changing recipes and introducing new foods. However, if you change your diet gradually, few people, including yourself, will reject the change.

Reason Number 5: Change is hard. I will probably fail.

The Response:

You can change successfully. Change is not easy for most of us. But then many of us make it much harder than it has to be. We tend to set unrealistic goals, or adopt someone else's goals which may be realistic for them, but are unrealistic for us. Then when we fail, we get angry with ourselves. Each time we try and fail, we have less confidence in our ability to succeed. No wonder change becomes something we dread. However, with the right approach, change can be exciting and successful. The following guidelines will help.

1. **Make gradual changes. Take small steps and allow yourself to experience success.**

If you make dietary changes gradually, you are more likely to succeed at permanently changing your diet. If changes are sudden, and especially if they mean eliminating or changing favorite recipes while introducing many new ones at once, they will not be well-received by you or the children in your care. We typically like what we are accustomed to best. Rapid change is too disruptive, too noticeable, too different. If you attempt to change too quickly, you and your kids may dislike the new diet and abandon your change efforts altogether.

2. **Set reasonable goals.**

In setting your goals, don't focus just on where you ultimately want to be. Consider your starting point. **Set goals you think you can achieve even if you think they are quite a distance from where you eventually hope to be.** Once you make this first step, strive to go further. Make the next step a little more difficult. You'll get there eventually, and with less trouble and a bigger chance at staying there. (There will be more on setting goals later in this section.)

3. **Develop a plan for reaching your goals.**

Developing a good plan increases your chance of success. As you develop a plan, be as specific as possible about how you will meet your goals. Identify the behavior you want to exhibit, and when that behavior is appropriate. If you can, specify how often or how much. Your goals won't seem so big when you know exactly what behavior it will take to reach them. (This will be discussed in more detail later in this section.)

4. **Reward yourself, your family, and the children in your care - but not with food.**

Success is one of the best rewards for your change efforts. You will be encouraged and ready to try for the next goal. However, extra rewards for achievements and for efforts won't hurt. Pick something other than food as the reward. For example, spend extra time at an activity you and the children find enjoyable. Also pick an extra reward for yourself, perhaps one that does not involve the children. Rewards emphasize that you and the children have been successful, and this is always a good feeling. Remember, the goal is improvement, not perfection. **With each accomplishment, no matter how small it may seem in relation to where you would ultimately like to be, you have made an important step. Rewards will be well-deserved.**

Be successful in changing your diet.

This chapter will help you in:

Evaluating Your Diet Page 9

Setting Your Goals Page 33

Developing a Plan For Meeting Your Goals Page 37

This chapter also provides Suggestions To Use in Developing Your Plan Page 41

EVALUATING YOUR DIET...

In this section you will evaluate
the snacks and meals you serve for:

variety | page 11
fat, saturated fat, and cholesterol | page 15
carbohydrates (starch) and fiber | page 19
sugar | page 23
sodium or salt | page 27

Before you set your goals, it is important that you have a good idea where you presently stand in terms of the dietary guidelines. **What are your strongest points and what are your weakest points? Perhaps you could benefit from improvements in lots of different areas, but where do you need improvements most? What improvements will make the biggest difference nutritionally?** In order to answer these questions, it will be helpful to **review your menus for the past month to see what foods you serve most often and how you prepare them.** Then look at how the foods you serve compare to what is recommended in the dietary guidelines.

The following section will help you to evaluate the meals and snacks you serve in terms of each dietary guideline. Space is provided so that you can write down thoughts, concerns or questions . We have also included a self-rating scale related to each dietary guideline. **You are not being graded. This is for your use only and is designed to help you identify the areas where you might need improvement.**

You should refer back to the ratings you give yourselves, your answers to the questions asked in this section, and your notes when you select your goals and design your plan for reaching them.

1. Do you serve a variety of foods?

- **Glance through the menu**. Do you tend to serve the same things over and over?
- **What about breakfast?** Do you serve the same two juices week after week? Do you serve cereal most days?
- **What vegetables do you serve?** Do corn, potatoes and green beans show up over and over?
- **What meats do you serve?** Does ground beef show up frequently, one day as a hamburger patty, the next day as meatloaf?

Do you have a few favorite main dishes that you serve over and over?

Rate your diet or the foods you serve for variety using this scale developed by the United States Department of Agriculture Human Nutrition Information Service. Check the box that best describes your eating habits or the snacks and meals you serve children.

How often do you eat:	seldom or never	1-2 times a week	3-4 times a week	almost daily
1. At least 6 servings of bread, cereals, rice, crackers, pasta or other foods made from grains ?(An adult serving is equal to 1 slice of bread or 1/2 cup of cereal. Children's servings would be smaller.)	☐	☐	☐	☐
2. Foods made from whole grains?	☐	☐	☐	☐
3. Three different kinds of vegetables per day?	☐	☐	☐	☐
4. Cooked dry beans or dry peas?	☐	☐	☐	☐
5. A dark-green leafy vegetable, such as spinach or broccoli?	☐	☐	☐	☐
6. Two kinds of fruit or fruit juice per day?	☐	☐	☐	☐
7. Two servings of lean meat, poultry, fish, or alternatives, such as eggs, dry beans and dry peas, or nuts per day?	☐	☐	☐	☐

Refer to the answer box on the following page for the best answers to these questions.

ANSWER BOX

The best answers to the rating scale for variety are :

Question 1: Almost Daily.

You should eat at least 6 servings of bread, cereals, rice, crackers and pasta or other foods made from grains each day.

Question 2: Almost Daily

Whole grain breads and cereals provide vitamins, minerals and dietary fiber.

Question 3: Almost Daily

Vegetables vary in the amounts and kinds of vitamins and minerals they contain. We need a variety to be sure we are getting the nutrients our bodies need. 1.

Question 4: 3 to 4 Times a Week

Dry beans and dry peas provide a good low fat alternative to protein from animal sources. They are also a good source of dietary fiber.

Question 5: 3 To 4 Times a Week

Dark-green leafy vegetables are an excellent source of nutrients, like iron, which is low in many of our diets.

Question 6: Almost Daily

Fruits are an excellent source of vitamin C. Because vitamin C cannot be stored in the body, foods containing vitamin C need to be eaten every day.

Question 7: Almost Daily

These foods are good sources of protein. Many Americans actually get more protein than they really need.

Personal Notes:

Answer these questions for your information.

In terms of serving children a variety of foods, some things that I feel good about are:

My biggest problem or problems in terms of serving a variety of foods are:

Some changes I am willing to make are:

How do you score yourself in terms of serving a variety of foods?

1 - I could use lots of improvement.

2 - I could use some improvement.

3 - I do OK.

4 - I do well.

5 - I do very well.

Record your answer in the space provided on page 31.

2. Are you serving foods with too much fat, saturated fat, and cholesterol?

It is relatively easy to tell if you serve a variety of foods, but what about avoiding too much fat, saturated fat, and cholesterol? To determine how you stand in relation to this requirement:

- **Consider the foods you serve.** Some foods, for example eggs and organ meats, are naturally high in cholesterol.
  - Do you frequently serve fatty meats like bacon, sausage, and heavily marbled steaks and roasts?
  - Do you serve gravies or rich cream sauces?
  - Do you drown your salads with high fat salad dressing?
- **Look at how you prepare foods.** Some cooking methods, like frying, can add fat and cholesterol.
  - Are you a frequent fryer? Do you fry in animal fat?
  - How do you season your vegetables? Do you use butter and therefore add fat and cholesterol when it is not necessary?
- **Review your favorite recipes.** Do they specify ingredients that are high in fat, saturated fat, or cholesterol, like whole eggs or egg yolks, lard, whole milk or cream, butter or cocoa butter.
- **Read food labels.** What is contained in those pre-packaged foods you serve? This includes not only prepared dinners, but foods like sweet rolls, doughnuts, and pastries, and condiments like salad dressings and mayonnaise. What are their fat and cholesterol content?

Personal Notes:

Rate your diet or the foods you serve for fat, saturated fat and cholesterol using this scale developed by the United States Department of Agriculture Human Nutrition Information Service. Check the box that best describes your eating habits or the snacks and meals you serve children.

How often do you eat:	seldom or never	1-2 times a week	3-4 times a week	almost daily
1. Fried, deep-fat fried, or breaded foods?	☐	☐	☐	☐
2. Fatty meats such as bacon, sausage, luncheon meats, and heavily marbled steaks and roasts?	☐	☐	☐	☐
3. Whole milk, high-fat cheeses, and ice cream?	☐	☐	☐	☐
4. High-fat desserts such as pies, pastries, and rich cakes?	☐	☐	☐	☐
5. Rich sauces and gravies?	☐	☐	☐	☐
6. Oily salad dressings or mayonnaise?	☐	☐	☐	☐
7. Whipped cream, table cream, sour cream, and cream cheese?	☐	☐	☐	☐
8. Butter or margarine on vegetables, dinner rolls, and toast?	☐	☐	☐	☐

ANSWER BOX

Take a look at your answers. Several responses in the last two columns means that you have a high fat intake.

Personal Notes:

Answer these questions for your information.

In terms of serving foods with too much fat, saturated fat, and cholesterol, some things that I feel good about are:

____

____

____

____

____

____

My biggest problem or problems in terms of serving foods with too much fat, saturated fat, and cholesterol are:

____

____

____

____

____

____

Some changes I am willing to make are:

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How do you rate yourself in terms of serving foods with too much fat, saturated fat, and cholesterol?

1 - I could use lots of improvement.

2 - I could use some improvement.

3 - I do OK.

4 - I do well.

5 - I do very well.

Record your answer in the space provided on page 31.

3. Do the meals and snacks you offer provide adequate carbohydrates (starch) and fiber?

As the food pyramid illustrates, the largest portion of your diet should come from whole-grain breads and cereals, rice, grains, and pastas. The next largest portion of your diet should be fruits and vegetables. These are your major sources of carbohydrates (starch) and fiber.

- **How would the food pyramid look if it were constructed based on your menu?** Would grains, cereals, pasta, and rice make the largest portion of your food pyramid, with fruits and vegetables making up the second largest portions?
- Like many Americans, **do you rely too heavily on meats as a source of protein?** How often do you serve dried beans and rice or peanut butter and whole wheat or enriched bread as protein alternatives?
- **Do the soups, stews, casseroles, and pasta sauces you serve supply lots of vegetables?**
- **Do you serve whole grain breads and other whole grain products?**
- **Do you take advantage of snack time** to offer even more fresh fruits, vegetables, and grain products?

Rate your diet or the snacks and meals you serve for carbohydrates (starch) and fiber using this scale developed by the United States Department of Agriculture, Human Nutrition Information Service. Check the box that best describes your eating habits or the snacks and meals you serve children.

How often do you eat:	seldom or never	1-2 times a week	3-4 times a week	almost daily
1. Several servings of breads, cereals, pasta or rice?	☐	☐	☐	☐
2. Starchy vegetables like potatoes, corn, peas, or dishes made with dry beans or dry peas?	☐	☐	☐	☐
3. Whole-grain breads or cereals?	☐	☐	☐	☐
4. Several servings of vegetables?	☐	☐	☐	☐
5. Whole fruit with skins and/or seeds (berries, apples, pears, etc.)?	☐	☐	☐	☐

ANSWER BOX
The best answer for the questions in the rating scale for carbohydrates and fiber is almost daily.

Answer these questions for your information.

In terms of providing foods with adequate carbohydrates (starch) and fiber, some things I feel good about are:

My biggest problem or problems in terms of providing foods with adequate carbohydrates (starch) and fiber are:

Some changes I am willing to make are:

How do you rate yourself in terms of offering snacks and meals that provide adequate carbohydrates (starch) and fiber?

1 - I could use lots of improvement.

2 - I could use some improvement.

3 - I do OK.

4 - I do well.

5 - I do very well

Record your answer in the space provided on page 31.

Personal Notes:

4. DO YOU OFFER TOO MUCH SUGAR TO THE CHILDREN IN YOUR CARE?

Sugar comes naturally in some foods, like fruit, milk and even beans. In these cases sugar is accompanied by many other nutrients. In other foods sugar is added, either by you in cooking or preparing, or by the food manufacturer in processing. This is the sugar that you may wish to limit.

Scan your recipes and menus and answer these questions:

- **Do you add sugar to foods,** like vegetables and pasta sauces, when you don't need to?
- **Do you serve foods that contain a lot of sugar** when there are low-sugar alternatives?
- **Do many of your favorite recipes call for sugar?** Can the amount of sugar be reduced?
- **Do you typically serve sweet desserts or snacks?**
- **Do you buy and serve prepared or processed foods often? Read the labels. Do they contain a lot of sugar?** Remember, sugar goes by many names. Sucrose, glucose, maltose, dextrose, lactose, fructose, and syrups are all names for sugar.

Rate your diet or the snacks and meals you serve for sugar using this scale developed by the United States Department of Agriculture Human Nutrition Information Service. Check the box that best describes your eating habits or the snacks and meals you serve children.

How often do you:	Less than once a week	1 or 2 times a week	3 to 5 times a week	almost daily
1. Drink soft drinks, sweetened fruit drinks, punches or ades? (*Note:* None of these are eligible for reimbursement by the Child and Adult Care Food Program.)	☐	☐	☐	☐
2. Choose sweet desserts and snacks, such as cakes, pies, cookies, and ice cream?	☐	☐	☐	☐
3. Use canned or frozen fruits packed in heavy syrup or add sugar to fresh fruit?	☐	☐	☐	☐
4. Eat candy?	☐	☐	☐	☐
5. Use jam, jelly, or honey on bread or rolls?	☐	☐	☐	☐

ANSWER BOX

The more often you choose the items listed in the rating scale, the higher your diet is in sugar. However, not all of the items listed contribute the same amount of added sugars. You may need to cut back on foods containing sugar, especially those you checked "3 to 5 times a week" or more. This does not necessarily mean eliminating those foods from your diet. You can moderate your intake of sugars by choosing foods that are high in sugar less often, and by eating smaller portions.

Answer these questions for your information.

In terms of the amount of sugar I give to the children in my care, some things I feel good about are:

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My biggest problem or problems in terms of the amount of sugar I give the children in my care are:

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Some changes I am willing to make are:

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How do you rate yourself in terms of the amount of sugar you give to the children in your care?

1 - I could use lots of improvement.

2 - I could use some improvement.

3 - I do OK.

4 - I do well.

5 - I do very well.

Record your answer in the space provided on page 31.

Personal Notes:

5. DO YOU PROVIDE TOO MUCH SODIUM OR SALT?

The majority of the salt we consume is either added to the foods by us while cooking and/or at the table, or is added by the food manufacturer during processing, either for taste or as a preservative.

- **Check your menus to determine how often you serve processed foods.**
- **Check the labels on these foods to see how much salt or sodium they contain.** Do not rely on your taste to tell you the sodium or salt content of foods. Food, especially processed foods, can contain a lot of sodium without tasting salty.
- **Review the recipes you use regularly.** How much salt do they recommend you use?
- **To get an idea how much salt or sodium you are adding during cooking and at the table try this demonstration.**

Step 1: Cover the food container (pots, pans, or plates) with aluminum foil or plastic wrap.

Step 2: Add salt as you normally would letting it collect on the foil or plastic wrap.

Step 3: Funnel the salt that collects on the foil or plastic wrap into a measuring spoon. How much did you add? Remember, 1 teaspoon of salt contains 2,000 mg of sodium, or about an average of what someone should eat during an entire day.

Answer these questions:

- **Do you salt foods unnecessarily**, sometimes before you even taste them?
- **Do you buy low salt versions of foods** when they are available?
- **Do you serve salty or high sodium snacks** like pretzels, chips, pickles, some cheeses or salted crackers?
- **Do you serve lots of processed or prepackaged foods** like canned soups, stews and vegetables, hamburger helper, frankfurters and luncheon meats?
- **Do you put the salt shaker on the table** and allow the children to add salt as they wish?

On the following page is a rating scale developed by the U.S.D.A. Human Nutrition Information Service. Use this rating scale to evaluate your diet or the snacks and meals you serve children for sodium.

How often do you :	Less than once a week	1 or 2 times a week	3 to 5 times a week	almost daily
1. Eat or serve cured or processed meats such as ham, bacon, sausage, frankfurters, and other luncheon meats?	☐	☐	☐	☐
2. Eat or serve canned vegetables or frozen vegetables with sauce?	☐	☐	☐	☐
3. Use commercially prepared meals, main dishes, or canned or dehydrated soups?	☐	☐	☐	☐
4. Eat or serve cheese?	☐	☐	☐	☐
5. Eat or serve salted nuts, popcorn, pretzels, corn chips, potato chips?	☐	☐	☐	☐
6. Add salt to cooking water for vegetables, rice, or pasta?	☐	☐	☐	☐
7. Add salt, seasoning mixes, salad dressings, or condiments such as soy sauce, steak sauce, catsup, and mustard to foods during preparation or at the table?	☐	☐	☐	☐
8. Salt or allow children to salt food before tasting it?	☐	☐	☐	☐

ANSWER BOX

The more checks you have in the last two columns on the right, the higher your diet is likely to be in sodium. However, not all of the items listed contribute the same amount of sodium. For example, many natural cheeses are relatively low in sodium. Most processed cheese and cottage cheese are higher.

Answer these questions for your information.

In terms of the amount of salt or sodium I give to the children in my care, some things I feel good about are:

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My biggest problem or problems in terms of the amount of sodium I give the children in my care are:

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Some changes I am willing to make are:

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How do you rate yourself in terms of the amount of salt or sodium you serve?

1 - I could use lots of improvement.

2 - I could use some improvement.

3 - I do OK.

4 - I do well.

5 - I do very well.

Record your answer in the space provided on page 31.

Personal Notes:

Record your ratings here:

score

1. Eating a variety of foods. ____

2. Limiting fat, saturated fat, and cholesterol. ____

3. Getting adequate starch (complex carbohydrates) and fiber. ____

4. Limiting sugar. ____

5. Limiting sodium. ____

Note:

1 = I could use lots of improvement.

2 = I could use some improvement.

3 = I do OK.

4 = I do well.

5 = I do very well.

Now that you have rated yourself and answered questions about each dietary guideline, you can more easily compare your diet in terms of each guideline. **You can look back at your answers and determine on which dietary guideline you rated yourself lowest, and on which dietary guideline you rated yourself highest.** You have also identified some things you do well in terms of each dietary guideline, and some problems you have in terms of each dietary guideline. **Use this information in setting your goals.**

SETTING YOUR GOALS

In this section you will:

set your personal dietary goals | page 34

Your goals should be, above everything else, your personal goals. This means that your goals are based on your diet and the meals and snacks **you** serve. They **specify the improvements that you want to make.** You must be personally committed to achieving your goals. Without this commitment, you have little chance for success.

Look back at your evaluation of your diet. What would be good goals for you? Do you need to lower your cholesterol intake? Do you need to increase the variety of vegetables you serve? Do you need to serve healthier snacks?

Based on your evaluation of your diet, pick at least 4 dietary goals, more if you would like. They may include areas where you need a lot of improvement and areas where you need just a little improvement. Don't be concerned at this point with which goal you will pursue first, or how you will reach the goal. What matters now is identifying them. **As you identify each goal, list it in the space provided below.**

My dietary goals are:

Goal __ : ____________________

Goal __ : ____________________

Goal __ : ____________________

Goal __ : ____________________

Additional Goals : ____________________

Now that you have identified your goals, it is time to decide which goal or goals you will pursue first. **In deciding which goal or goals to pursue first, consider both where you need the most improvement and where you have the greatest chance for success.** Success is especially important in the beginning so you may want to select a goal (or goals) that you feel you can achieve.

Often the area where you feel you have the greatest chance at success and the area where you have the biggest problem are not the same. As an example, let's say that too much fat, saturated fat, and cholesterol may be your biggest problem, but it may also involve ways of cooking or eating habits that are the hardest for you to break. On the other hand, you may have found that you also eat too much salt or sodium. Lowering your salt or sodium intake may seem like an easier goal for you to achieve. You may want to begin there and strive for lowering fat, saturated fat, and cholesterol next. This will give you a better chance to experience success, and prove to yourself that you can change your diet.

You can **choose as many goals as you like,** and if you want to tackle your biggest problem first, even though it may be the most difficult to reach, that is your choice. **You are the best judge of your own abilities.** But remember, all you are selecting here is a starting point. Eventually you can pursue all of the goals you have identified for yourself.

After you have chosen the goal or goals you will pursue first, make a note. Go back to your list on page 31 and number your goals in the order you plan to pursue them. **Now you are ready to develop a plan for meeting your goals.**

DEVELOPING A PLAN FOR MEETING YOUR GOALS

In this section you will learn how to:

develop a plan to meet your personal dietary goals | page 38

In developing a plan to meet your goals, be as specific as possible. State what you will do, and where appropriate, how often. Perhaps the best way to explain how to develop a plan, is to present an example.

Let's say you have evaluated your diet, and/or the diets you provide the children and found that one of your biggest problems is that you use too much sodium or salt. As a result, you decided that your first goal will be to reduce your sodium or salt. You might want to be more specific and say how much salt or sodium you wish to consume each day. In this case your goal might be to reduce your salt or sodium intake to no more than 4,500 milligrams per day. (4,500 milligrams is above the 1,100 to 3,300 milligrams recommended in the dietary guidelines. However, if your usual level is approximately 5,500 milligrams a day, it is a reduction and a reasonable first step.)

You may not want to be so concerned with measuring and keeping track of your sodium consumption. That is OK. Measuring is not something you need to do on a regular basis. **Once you have an idea of how much sodium or salt you consume and what foods or what behaviors are contributing to the sodium in your diet, you can develop a plan to reduce it without measuring or keeping track.**

As we have said, we are trying for gradual change. Drastically reducing your intake to the recommended level could lead to failure. **Regardless of your goal, you have to start where you are and reduce your intake over time.** After you have become comfortable with a lower level of salt intake and you no longer have the desire to add more salt to foods or crave salty foods, you can try to reduce it even further. Eventually you will reach the level you desire.

Now you need a specific plan for how you will change your diet to meet this goal. You might examine your diet for the past week, or review the notes you took in evaluating your diet, and identify the foods and behaviors that contribute sodium to your diet. Perhaps you have found one or more of the following:

1. You tend to eat canned vegetables, soups and stew frequently. They contain high levels of sodium.

2. You add salt to your foods at the table, usually without even tasting them.

3. You often cook with seasonings like onion salt, garlic salt, and bouillon.

4. You serve cheese and frankfurters weekly.

Based on this evaluation, you may develop the following plan for reducing your salt intake.

1. You will serve fresh or frozen vegetables instead of canned and not serve canned soup more than once every other week.

2. You will not put the salt shaker on the table and will always taste before salting.

3. You will switch from garlic and onion salt to garlic and onion powder, try to use more fresh onion and garlic, and experiment with other spices and herbs. You will use less bouillon and will try cooking with juices and making your own stock. (When you make your own stock, be sure to chill it and skim off the fat before using or freezing it.)

4. You will serve cheese and frankfurters no more than once every other week and will select low sodium versions when they are available.

In this example we have been very specific about the problem and what we intend to do about it. Notice that in most cases, when foods items were limited, we were specific about how many times a week we would eat or serve them. This makes it easy to monitor our progress and increases our chance of success.

What follows in the next section are many suggestions of specific things you can do to reach your dietary goals. The suggestions you pick from this list, along with those you may think of on your own, will become your plan. **You are not expected to adopt all of the suggestions. You are simply to choose from this long list the ones that seem reasonable to you.** Place a check mark next to the ones you select so that they will be easy to spot when you wish to refer back to them.

The suggestions are organized under each dietary guideline. So, for example, if you are developing a plan for your goal of lowering your fat intake, turn to the section with the heading "To lower your fat, saturated fat and cholesterol, choose from these suggestions." **The suggestions are further divided by:**

1. **Suggestions related to selecting foods**

2. **Suggestions related to cooking or preparing foods**

3. **Suggestions related to changing recipes.**

Some of you may find one category of suggestions more useful and may choose suggestions for your plan from that category only. Others may choose useful suggestions from each of the categories.

Remember, there are many ways to improve your diet. And what seems reasonable to one person, may seem unreasonable to another. **Choose the suggestions that will work best for you and add some of your own.**

Following the list of suggestions, space is provided on pages 69 through 77 for you to write each goal from page 31 and the plan you develop for reaching it.

SUGGESTIONS TO USE IN DEVELOPING YOUR PLAN

This section contains:

Suggestions for adding variety	page 43
a story about how one provider promotes variety	page 44
suggestions for lowering fat, saturated fat and cholesterol	page 49
a story about how one provider lowers fat and cholesterol	page 53
suggestions for increasing starch and fiber	page 55
a story about how one provider increases starch and fiber	page 57
suggestions for lowering sugar	page 59
a story about how one provider lowers sugar	page 61
suggestions for lowering salt and sodium	page 65
a story about how one provider lowers salt and story	page 67
space for you to record your goals and plans	page 69

There is also supporting information on:

modifying recipes	page 78
cooking to conserve nutrients	page 79

1. To add variety, pick from these suggestions:

- **Try some of the flavored pastas**, such as spinach noodles or whole-wheat spaghetti. Pasta also comes in a variety of shapes that children enjoy. This can add interest to your meals.

- **Try brown rice** instead of white rice to add texture, fiber, and flavor to many dishes.

- When you bake breads from scratch, **use enriched or whole-grain flours.** Other substitutes that will add variety in terms of taste and texture are oatmeal, pumpernickel, rye, and cornmeal products.

- **Add extra vegetables** to soups, stews, casseroles and pasta sauces. Try using this opportunity to introduce new vegetables.

- **Add fruits to baked goods** like muffins and breads.

- **Substitute dry beans and dry peas for some or all of the meat** in meat dishes like casseroles and meat sauces.

- **Add vegetables, fruits, and even a small amount of beans, to tossed salads.** Try making **pasta salads** and **fruit salads.**

- **Cut up vegetables and serve them raw** either as a snack or with the meal. Try serving them with a lowfat dip or spread.

- When you plan menus to increase variety, consider serving **both hot and cold foods, creamy and crunchy, spicy and mild.**

- **Think about ways you can create variety in color.**

One Provider's Story:

How Linda Promotes Variety

Linda is relatively new to family child care. She has had her own family child care home for about a year. She began her career as a family child care provider when she had a difficult time finding quality child care for her youngest child. Linda has 4 children of her own. In her child care home she cares for 6 children plus an additional 2 in after-school care. Feeding them all can be time-consuming and expensive. According to Linda, it takes good planning and imagination.

It is easy to see the effect of Linda's childhood in the way she feeds and cares for her child care children. Linda grew up on a farm where there were no convenience foods. Instead, the garden supplied her family with lots of fresh vegetables in the summer and a freezer stocked with enough vegetables to last through the winter. Her mother and grandmother loved to cook. The table was always set with pretty dishes and the family gathered to enjoy big meals with lots of variety. As Linda describes it, "Eating was the family social hour." Linda says her mother and grandmother were not educated, but they were creative. They may not have intentionally set out to serve Linda a nutritious variety of foods, or even realized how important variety was, but her mother and grandmother provided her with a healthy diet and taught her to appreciate it. Now Linda is passing that lesson on to the children in her family child care home.

Linda admits that she was somewhat alarmed by the diets of some of the children she cares for when they first began coming to her family child care home. She describes their diets as the "factory worker's lunchbox," lots of sandwiches, and convenience foods, chips, and Little Debbies for dessert. Two of the children had never even tasted an orange or strawberry or melon before. The only fruits they had tried were apples and bananas. Two others were having coke and cheetos for breakfast until Linda offered to feed them breakfast each morning. Most of the children Linda cares for are from low income families, some of them from single parent homes. One single mother whose 2 daughters are in Linda's day care, works full time at a factory job and attends night classes at the local college. Linda recognizes the challenges of working full-time and trying to meet all of the needs of a family. And the families of the children Linda cares for appreciate Linda's efforts to provide their children with the nutrients and calories they need. According to Linda, "If I don't feed these kids what they need, they may not get it."

Linda offered many good ideas about introducing children to a variety of foods. Here are three suggestions from Linda.

1. Introduce children to new foods when they are hungry.

Linda found that when the children were hungry they were more willing to try new foods. In Linda's experience, one of the best times to introduce a new food to the children is when lunch is being prepared. According to Linda, preparing lunch and watching children is sometimes a two person job. The closer the food is to being ready, the hungrier, more excited, and sometimes crankier the children get. And what Linda needs most during these times is a few minutes of quiet so that she can finish the preparation and get the meal on the table. One way she achieves this is by offering the children nutritious appetizers. For example, sometimes she serves vegetable and fruit slices, including some they have not tried before. She prepares the appetizer tray earlier in the day and refrigerates it until a few minutes before lunch. These appetizers are a nutritious way to keep the children busy so she can finish preparing lunch in peace.

2. Make new foods fun.

Linda found that some of the children in her care had never tried pineapple or cantaloupe. When she first offered it to them they would venture a smell but that was about all. When she cut the fruits into bite size pieces, had the children sit in a circle on the floor, presented them with a "party tray," and invited them to eat with their fingers, she got different results. Pineapple and cantaloupe became fun. They tried it and liked it. (If you try this, make sure the fruits are cut into the right size chunks so that the children do not choke on them. See the information on Preventing Choking in chapter #1 for more information.)

3. Get the children involved.

Getting the children to try different vegetables can sometimes be a problem. Linda found she was more successful when she involved the children somehow in food preparation. Some of the ways she gets them involved is to let them help wash the vegetables, push the buttons on the food processor, or turn the mixer bowl. They even consider it a treat to wash their plastic dishes. Linda admits that she sometimes has to mop up a little splashed water, and sometimes wipe down the cabinets, but the children enjoy helping. It makes them feel like they are important contributors and they are learning good habits.

Linda is also fortunate to have a vegetable garden in her backyard. The children love to help. Their favorite job is shucking the corn, especially pulling out the silks. One boy called this "pulling the corn's hair out." Linda noticed that once they saw where foods came from, they were eager to discover how they tasted. After one season in the garden, some of the children who had refused to eat cucumbers decided that they liked them. Linda also lets each child have his/her own tomato plant. When they were putting the cages around the plants, one of the girls asked "But why do we have to lock them up?"

Linda cares about the quality of the foods she serves and has many good ideas. But how does she do it on a tight schedule and a tight budget? **She offered these suggestions for saving time and money.**

1. When you prepare lunch for the children, cook enough for your own family's dinner.

2. Make your own convenience foods. Set aside one day a week for major cooking. Put enough food for one meal in a container and freeze it. All you have to do is thaw it out, warm it up, and it's ready to serve.

3. Save what you can to use later. This applies to broths, and leftover vegetables that can be frozen and used later in soups, stews or casseroles. Linda even bones her own chicken breasts and uses the bones to make broth. Before you throw leftovers away consider: can it be safely stored for later use? And what are the ways I might use it? **Remember: Food stored improperly can be a health hazard.** A helpful hint: label and date frozen foods so you know what is in the freezer and how long it has been there. You might also want to date food items you place in the refrigerator. (Read the chapter on Protecting Children's Health for more information.)

4. Buy the less expensive store brands when you are not sacrificing quality. Linda discovered that for some food items, the quality of the store brand was not as good as the quality of the more expensive major brand. In these cases she switched back to the major brand. But when the quality is as good, Linda chooses to save money.

5. Linda pointed out that **when you think about costs, you have to consider how many servings you can get from a food item.** When she began figuring costs in this manner, she discovered some things that surprised her. For example, a fresh cantaloupe or pineapple can provide many servings and is usually cheaper per serving than an orange, and it is both less expensive and more nutritious than canned fruit.

Linda knows she has improved the diet of some of her day care children. In some cases she has also influenced their family's eating habits. Some mothers report their children requesting foods that they had assumed the children would not like, so they had never even offered them. Linda's favorite story regarding the way she has influenced family eating patterns comes from the mother of a boy in her day care. Linda never fries foods anymore. When she serves pork chops, she pan broils them. One child, whose mother batters and fries her pork chops, taught his mother a lesson in lowering fat without even realizing it. As she was preparing pork chops for their dinner, the young boy objected to her high fat cooking method. He wanted his pork chops "naked like Miss Linda makes them."

2. To lower fat, saturated fat, and cholesterol, choose from these suggestions:

A. Select foods wisely.

- **Read the food labels carefully** to determine both the amount and type of fat present in foods.

- **Choose lower-fat cheeses** such as feta, neufchatel and mozzarella instead of high-fat ones such as Swiss or cheddar.

- **Use plain lowfat or nonfat yogurt seasoned with herbs, grated parmesan cheese or whipped lowfat cottage cheese with a little lemon juice or herbs as toppings** for foods like potatoes and rice instead of butter, margarine, gravy, and sour cream. If yogurt is substituted in a sauce that is to be heated, add 1 tablespoon of cornstarch to 1 cup of yogurt to prevent separation.

- **Serve vegetable and broth-based soups** instead of cream-based soups.

- **Avoid fat-rich pastries and rich creamy desserts.** Try angel food cake, frozen fruit bars, fresh fruit or lowfat frozen yogurt instead.

- **Choose tuna packed in water** rather then oil.

- **Limit use of butter, lard and lard based shortenings, heavily hydrogenated fats (some margarines), and foods containing palm and coconut oils.** Instead choose margarine in which liquid vegetable oil is the first ingredient and choose vegetable oils like canola, corn, sunflower, soybean, safflower and olive oils.

- **Avoid fat rich meats, organ meats and egg yolks.** Choose lean meats, fish, poultry with the skin removed, and dry beans and peas as protein sources.

- **Avoid high-fat dairy products** such as whole milk, cream, sour cream, and most cheeses. Choose skim or 1% milk except when serving children. **Never give reduced fat milk to children under two**. Substitute plain nonfat or lowfat yogurt for sour cream, and select lowfat cheeses.

- **Avoid the high-fat, breaded and deep fried foods.**

- **Select lean meats like chicken, turkey, fish, lean beef cuts** (top round, eye of round, top loin and sirloin, lean hamburger) and lean pork cuts (tenderloin, loin, chops, ham). **The "select" grade cuts are the leanest grade.** If "select" grade cuts are not available, choose "choice" grade. **"Prime" grade is the fattest.** Avoid it if possible. Always remove the skin from chicken and turkey.

- **Select leaner ground beef.** Generally the lower the price and the lighter the color, the more fat has been ground up with the meat. If you don't want to pay extra for ground beef with less fat, **remove excess fat after cooking by draining the meat.**

B. Cook and/or prepare foods in ways that reduce fat. Do not add unnecessary fat.

- **Do not season vegetables with salt pork, bacon drippings or fatback.** If this seasoning is difficult for you to give up completely, try cutting down on the fat while keeping the flavor. Make the meat broth ahead of time and refrigerate to chill. The fat will come to the top and you can easily remove it. This will give you a tasty fat-free, or at least lower-fat, broth to use in cooking vegetables like greens.

- **Do not add butter or margarine to vegetables.** Instead try lemon juices, herbs, and spices. Saute or stir-fry with little fat or use water, wine, or broth.

- **Use fat free cooking methods** like broiling, baking, grilling, poaching, steaming, or boiling rather then frying.

- In addition to choosing lean meats, it is important to cook meats in a way that does not add fat. **Bake, broil, or stew, instead of frying.** Also, leaner meats may be tougher, and therefore harder for young children to chew. You may need to cook them longer or differently, for example with moist heat or steam, to make them more tender.

- **Trim visible fat from meats before cooking and remove skin from poultry.** To keep skinned poultry moist while baking, wrap in aluminum foil.

- **Prepare meat, poultry, or fish without breading or batter.** Coatings absorb fat.

- **Brown ground meats without adding fat. Drain off fat** before mixing in other ingredients.

- **Place meat on a rack when roasting, broiling, or braising** so that the fat can drain away from the meat.

- Cook with little or no added fat. Use **nonstick pans or nonstick vegetable sprays.**

- **Baste with unsalted broth, unsalted tomato juice, or fruit juice** rather than drippings.

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- **To brown rolls without adding fat, brush them with egg white or skim or lowfat milk** instead of butter.

- **Chill drippings and broth and remove fat before making gravies, soups, and sauces.** To avoid lumps, mix thickener (flour or cornstarch) with cold liquid ingredients (unsalted broth, water, fruit juice) before heating. This mixes best when you use an electric blender.

- **Chill soups, gravies and stews, and skim off the hardened fat** before reheating to serve.

- Salt and oil are not necessary when cooking pasta, rice, and hot cereals. **Try cooking pasta or rice in unsalted broth or unsalted tomato juice.**

C. Modify high fat recipes to reduce the fat or try new recipes for lowfat or nonfat substitutes.

- **Make your own lowfat, low-sodium condiments.** For example, try making your own salsa by mixing diced fresh or "no-salt-added" canned tomatoes with diced onions, green peppers, and chilies.

- **Make your own salad dressings.** Creamy dressings can be made with plain lowfat yogurt rather than sour cream or mayonnaise. Decrease the proportion of oil in home-made oil based salad dressing like Italian dressing. Try 1/3 cup of oil to 2/3 cup of vinegar. Lowfat cottage cheese or buttermilk seasoned with herbs and spices also makes a lowfat dressing.

- **When making casseroles, be moderate in your use of high-fat crumb toppings.**

- **Make the meat, poultry, or fish in main dishes and casseroles go farther by combining them with pasta, rice, and other grains, or vegetables.**

- **When making egg dishes, use only one egg yolk per serving.** Make larger servings of dishes like scrambled eggs by **adding extra egg whites. When making quick breads, cookies and cakes, use two egg whites in place of each whole egg.** In some recipes, simply decrease the total number of eggs. This is especially true if the fat and sugar also are decreased in the recipe.

- **Try substituting dry beans or dry peas** for some or all of the meat, poultry, or fish in some dishes.

- **When making pasta sauces, don't add oil.** Fat is not a necessary ingredient.

- **When baking chocolate desserts, use 3 tablespoons of cocoa in place of each ounce of baking chocolate.** If fat is needed to replace the fat in chocolate in baked goods, use 1 tablespoon or less of a vegetable oil or a margarine in which the first ingredient on the ingredient label is a liquid oil (as opposed to a hydrogenated fat).

- **In baked products, reduce fat by 1/4 to 1/3.** For example, if a recipe calls for 1 cup shortening, try 2/3 cup oil. This works best in quick breads, muffins, and cookies. The minimum amount of fat for muffins, quick breads, and biscuits is 1 to 2 tablespoons per cup of flour. The minimum amount of fat for cakes is 2 tablespoons per cup of flour. Some yeast breads, such as english muffins and french bread, can be made without any fat.

- **Pureed fruits, especially pureed prunes, can be substituted for the fat (shortening or butter) in cakes and cookies.** You simply replace the fat with an equal amount of pureed fruit.

- **Use skim or lowfat milk when making cream soups.** For extra richness, try evaporated skim milk.

A HINT ABOUT REDUCING FAT AND SUGAR IN RECIPES:

Sugars and fat affect the tenderness and volume of baked products. Sugars also add to the flavor. It is important to have the right balance of ingredients. You can often use less of both fat and sugar and can sometimes eliminate them and still have a good tasting product. You will find more about this in the supporting information on Modifying Recipes: Understanding the Purpose of 4 Key Ingredients, page 78 in this chapter.

One Provider's Story:

Fat and Maria's Balancing Act

Maria has been a family child care provider for a long time, but it wasn't until recently that she became concerned with the amount of fat and cholesterol in the foods she prepares for the children in her care. Both her husband and her 2 children have high-cholesterol which increases their risk for heart disease. In their cases, the condition is partially hereditary and the doctor has put them on medication. Still they can help to reduce their risk of heart disease by lowering the fat, saturated fat, and cholesterol in their diets. The good eating habits Maria is learning as a result of her concerns for her family's health have also meant healthier diets for the children in her family day care home.

Maria has an important job in meeting the different dietary needs of her family and the children in her day care. Her family members have a medical condition that requires a very restricted fat, saturated fat, and cholesterol intake. However, this kind of lowfat diet would not be good for the children in her day care. They need an adequate amount of fat in their diets in order to grow and develop properly. In addition, Maria is caring for one 16 month old. He needs even more fat than the older children. Maria knows that lowering fat in the diets of children under two can be dangerous. Although this sounds like quite a challenge, Maria assured me "it's not as tough as it sounds."

To Maria, reducing fat, saturated fat and cholesterol is a balancing act. She has a goal for her family's fat, saturated fat, and cholesterol consumption and she decides where and how to limit fat and cholesterol in order to reach it. Occasionally Maria serves a food relatively high in fat and cholesterol. For example, Maria and her family enjoy steaks on special occasions. But now instead of having a baked potato covered with butter and sour cream with their steak, they have wild rice and a green salad with low-fat no cholesterol salad dressing. In other words, if Maria serves a high fat food item, she makes sure the other foods on the menu are low enough in fat and cholesterol to make up for it.

In addition to performing this balancing act with her family's diet, Maria says she also makes sure her family's fat grams really count. Maria put it this way, "if you only have a certain number of fat grams to consume, you want them to come from foods you really like." Maria gave "real mayonnaise" as an example. Both she and her husband prefer the taste of the "real thing," but they use it selectively. She uses low-cholesterol mayonnaise in her potato salad and the "real mayonnaise" on sandwiches. As Maria explained, if you use the real mayonnaise in potato salad, you get a lot of fat and cholesterol. And with all of the other ingredients in her potato salad, the taste of the mayonnaise is hardly noticed. In this case she and her family would rather use their limited amount of fat and cholesterol for sandwiches. As long as they do not exceed their goal for fat and cholesterol consumption, how they limit their fat and cholesterol is their choice.

Maria does not limit the fat in her day care children's diet in the same way she limits it in her family's diet. She avoids high-fat, high-sugar foods like doughnuts which have little nutritional value. She has also stopped frying foods and has reduced high fat toppings like butter, sour cream and cream cheese. However, Maria is careful not to limit fat too much in the children's diets. For example, while her family eats the reduced fat cheeses and only drinks skim milk, the children in her day care home always get whole milk and regular cheese.

Maria realizes that the foods she offers the children she cares for will have a big effect on the food preferences they develop. And her family's problem with high cholesterol has made her realize just how important that is. Some of the parents of the children in her care have long commutes to and from work. Maria knows they are usually tired at the end of the day and sometimes drive through a fast food restaurant to buy the child dinner. Maria feels that because they know their child is getting a healthy diet while in her care, they can be more comfortable making those kind of choices. They can rest assured that she is providing their children a healthy diet and teaching them good eating habits in the process.

3. To increase your intake of starch and fiber, pick from these suggestions.

A. Select good sources of starch and fiber.

- **Choose foods that are good sources of fiber and starch** such as whole-grain breads and cereals, fruits, vegetables, and dry beans and peas.

- **Replace snacks high in fat and sugar with ones high in fiber and starch.** For example, cut up and serve raw fresh vegetables and fruit for snacks.

- **For added fiber, replace fruit juice with fresh fruit.**

- **Processed, refined, or "instant" foods have less fiber than their original form. Choose the original**, for example, the old-fashioned type of oatmeal, rather than the instant type. Try using a crock pot with the old-fashioned oatmeal and let it cook overnight. This will save you time, the crock pot will be easy to clean, and breakfast will be ready when you are.

B. Cook or serve in ways that save vitamins and do not destroy fiber.

- Some methods of preparing vegetables cook many of the vitamins and minerals away. Pounding, grinding, overcooking, or mashing can destroy the fiber in foods. **Serve fruits raw. Serve vegetables raw when you can, or try steaming either in a pot with little water, or in the microwave.** Vegetables should be brightly colored and crisp after cooking.

- **Leave the skins or peelings on fruits and vegetables when possible.** For example, don't peel apples or pears. When making mashed potatoes, leave the peelings on when you cook and mash them. Also try serving the peelings of baked potatoes.

C. Modify recipes to add more starch and fiber.

- **Add fruits to muffins, pancakes, salads, and desserts.**

- **Add dry beans or dry peas as a protein substitute for part or all of the meat** in soups, pasta sauces and other main dishes.

- **Add extra vegetables** to stews, soups, casseroles, quiche fillings, salads and pasta dishes.

- **Substitute whole-wheat flour for white flour.** Whole-wheat flour can usually be substituted for up to 1/2 of the all-purpose flour called for in a recipe. For example, if a recipe calls for 2 cups of all-purpose flour, try 1 cup of all-purpose flour and 1 cup of whole wheat flour. When completely substituting whole-wheat for white flour, use 7/8 cup whole-wheat flour for 1 cup of white flour.

One Provider's Story

Mary Changes Her Diet

Mary admits that her decision to pursue a career as a family day care provider surprised everyone, even herself. But as the oldest child of 8, caring for children was second nature to her.

Mary had been a provider for three years when a friend mentioned that the community college near her home was offering an associate degree in child development. The idea of getting an associate degree both excited and frightened Mary. She looked forward to what she might learn, but at the same time she wondered where she would find the time to study. Mary decided to accept the challenge. She met with the school counselor and worked out a part-time class schedule that she thought she could handle. In September of 1989, Mary began working toward her Associate degree in child development.

Mary loved school and discovered that she was learning much more than she had anticipated. She also realized what a demanding job she had been doing all these years. Being a family day care provider requires many different skills. One has to know about child development, first aid, health and safety, bookkeeping, filing income taxes and preparing nutritious snacks and meals. During her third semester, Mary took a nutrition course. What Mary learned in that course surprised her, and made her take a second look at her childhood diet.

Mary says when she looks back on her childhood, she realizes that her family was actually pretty poor. Her father worked long hours in a factory and her mother stayed home to cook and clean and care for the 8 children. Occasionally her mother would take in sewing. As the oldest child, Mary had many responsibilities. She helped with the cooking and cleaning, and as she put it, practically raised the two youngest children. Even though money was tight in her family, Mary recalls that they always had plenty to eat.

Mary's mother was not only good at stretching the family's food dollar, but as it turns out, also provided nutritious meals for the family. Mary says they ate a lot of pasta, bread, potatoes, and her mother's great lentil soup. Her family could not afford to purchase meat very often, so it was served mainly on special occasions.

Now Mary is married and she and her husband can afford to eat meat as often as they choose. But as Mary learned in her nutrition class, the high carbohydrate diet she grew up on is actually a very healthy diet. Eating large portions of meat at every meal provides more protein than people actually need. In addition, most diets high in meat and dairy products are also high in saturated fat and cholesterol. Saturated fat and cholesterol contribute to the risk of heart disease and some forms of cancer.

As a result of her nutrition class, Mary has begun to change both her diet and the meals and snacks she serves to the children in her day care home. She serves more pasta, rice, whole grain breads, beans, and vegetables. She even called her mother to get her recipe for lentil soup.

Mary admits that she is actually comforted a little by the return to old, familiar foods and recipes her mother had prepared for her so often. And she delights in seeing her childhood favorites become favorites among the children in her day care home-- and in knowing that in the process, she is helping the children develop healthy eating habits.

4. To decrease your sugar intake, choose from these suggestions.

A. Select foods that are low in sugar and eat foods with sugar less often.

- **Avoid eating sweets as snacks between meals.** Remember: How often you eat sugar and foods containing sugar is as important as how much sugar you eat.

- **Read the food labels carefully for clues on sugar content.** Ingredients are listed in order of the amount the product contains. If the name sugar, sucrose, glucose, maltose, dextrose, lactose, fructose, or syrups appears first, then there is more sugar in the product than any other ingredient. If several of these names for sugar are listed on the label then the food is probably high in sugar. Select items lower in total sugar when possible.

- **Buy fewer of the foods that are high in sugar** such as prepared baked goods, candies, and sweet desserts.

- **Select fresh fruits or fruits canned in their own juices** or in light syrup rather than heavy syrup.

- **Drink more water, club soda, skim milk and fruit juice and fewer soft drinks, fruit drinks, soda pops, and punches.** Try making fruit juice coolers with equal parts of fruit juice and club soda or seltzer. (If you are enrolled in the Child and Adult Care Food Program, remember that you will not be reimbursed for serving soft drinks, fruit drinks, soda pops, and punches, or the fruit juice cooler described above.)

- **Use commercially prepared sauces, such as barbecue sauce and ketchup sparingly.** These are often high in sugars, sodium, or both.

B. Don't use sugar in cooking or preparing foods when it is not necessary.

- **Do not add sugar to vegetables, pasta sauces, fruit or fruit salads.**

C. Modify recipes to reduce the amount of sugar you use.

- **Try putting less sugar in your favorite recipes.** Reduce it a small amount at the time so you can decide what amount is right for you.

- **Add a small amount of vanilla, cinnamon, or nutmeg to foods you bake** to enhance the flavor when you reduce sugars.

- **Use as little as 1/2 cup sugar per cup of flour in cakes.** (Cakes with less sugar may be more like quick breads than cakes.)

- **In cookies, bars, and cakes, replace 1/4 of the sugar called for with an equal proportion of nonfat dry milk.** For example, if a recipe calls for 1 cup of sugar, use 3/4 cup of sugar and 1/4 cup of nonfat dry milk. This reduces calories and increases calcium, protein and vitamin B2 (riboflavin).

- **Use 1 tablespoon sugar per cup of flour in muffins and quick breads.**

- **Use only 1 teaspoon sugar per cup of flour in yeast breads.**

One Provider's Story:

How Patricia Reduced Sugar

Patricia has been a family child care provider for several years. In addition to raising 3 children of her own, she has been a second mother to many of the children in her neighborhood. She has not only earned a reputation as an excellent provider but she is also known for her cooking. She especially enjoys making cakes, cookies, and candy. According to Patricia, the older children in the neighborhood who were in her day care home as youngsters still stop by to visit, especially if it is around snack time.

Patricia learned to cook from her mother who for many years had been their small towns' only source for birthday and wedding cakes. She took special orders from people in the community and did the baking in her home. While it wasn't a full time job she did do a pretty good business and she taught Patricia a lot about cooking in the process. Pat credits her mother's business, and her experience as her mom's helper, for the sweet tooth she has today.

About three years ago Patricia was introduced to the Child and Adult Care Food Program. She thought enrolling in the program would be a great opportunity to increase her income and to meet other providers. In order to be reimbursed for the snacks and meals she served, Patricia was required to attend 3 nutrition workshops each year. The first workshop she attended was entitled "Preparing Nutritious Snacks."

Three years and many nutrition workshops later, Patricia still points to the workshop on nutritious snacks as the one which resulted in the biggest change in the diets of the children she cares for. Before attending the workshop, Patricia thought of snacks as the special treats you give children so that they don't get too hungry and cranky between meals. She always made sure snack time was fun for the children. They loved the sweet, high-fat treats she made for them and it made her feel good to see them enjoy what she served. She had never thought much about how nutritious a snack might be. At the workshop she learned just how important nutritious snacks were in making sure children got all of the nutrients and calories they needed to grow and develop. It was difficult for Patricia to imagine children eating carrots with ranch dressing, or apple slices with peanut butter with the same enthusiasm they had for chocolate cake and ice cream, or cookies and kool-aid, or maybe a homemade brownie or pecan praline. That would be a big change at her child care home, but she decided to give it a try.

Patricia admits that after teaching the children to expect a sugary snack, it was not a simple thing to switch them to more nutritious snacks. It took creativity, patience, and persistence, but Patricia did it. She even described the change as painless. Here are some of the things she did that made it easier.

1) She began to experiment with some of her recipes. She tried reducing the amount of sugar and fat and found that in most cases, sugar and fat could be reduced without her or the children even noticing.

2) She began baking fewer cookies and cakes with icing and more muffins and bread-like cakes like zucchini bread and banana bread. She mixed whole grain flour with white flour, added fruit where she could, and skipped the icing. Even though the muffins and breads were less sweet and more nutritious, the children still loved them. They especially loved the bite-size muffins Patricia made.

3) Patricia put aside her ideas about what children would and would not eat, and began offering them fresh vegetables and dips, fresh fruit, and cheese and crackers. She was surprised to find that for the most part they not only ate these foods but they seemed to like them. This was especially true when she did something different to make eating fun. For example, sometimes she would take the children outside and they would have a picnic during snack time. Patricia says there always seems to be one child who frowns at vegetables, and refuses to eat them, but in time they come around.

4) At the workshop, it was suggested to Patricia that she involve the children in preparing the new more nutritious snacks. Helping with preparation makes children more willing to taste new foods. This seemed to work. In fact, once they learned that snack time meant they got to help, the children looked forward to snack time even more. Patricia let them participate in many ways. They helped wash vegetables and fruits and arranged them on platters. They spread peanut butter on crackers and stuffed celery with pimento cheese. They even helped to make banana bread by stirring the batter and mashing the bananas. Sometimes Patricia would provide them with slices or chunks of fresh fruit and cheese and let them arrange it on bread, crackers, or even their plates to make

faces or other designs. According to Patricia, the children's involvement sometimes made preparing snacks take a little longer, but she expected that. It was not time wasted. She used these activities to teach the children about counting, colors, shapes and textures. Patricia occasionally took the children on a field trip to the farmer's market. She would let each child pick one fruit to go in the next day's fruit salad, encouraging them to pick a fruit they had never tried.

Through the nutrition training, Patricia learned how important snack time is for children and has improved the nutritional quality of the snacks she provides. She has also learned how important it is to involve children in preparing foods. Patricia is teaching her children lessons about nutrition and eating a healthy diet that they will take with them long after they leave her day care. Patricia still bakes cakes and cookies, just not as often as before. Snack time is still special in her family day care home and she still manages to have a few drop-in visitors from the neighborhood, especially around snack time.

5. To decrease your intake of salt and sodium, pick from these suggestions:

A. Select low salt or no salt food products.

- **Read the food labels. Any ingredient that includes "sodium" as part of its name contains sodium.** Choose the items with the least amount of sodium.
- **Limit the amount of salt you use as seasoning.** Try herbs, spices, and lemon juice instead.
- **Limit your intake of salty foods** such as potato chips, pretzels, salted nuts and popcorn, condiments (soy sauce, steak sauce, garlic salt), pickled foods, sandwich meats and frankfurters, some cheeses, and some canned vegetables, stews and soups.
- **Try the lower sodium versions** of processed foods like soups, salad dressings, and sauces when they are available.
- **Avoid commercially prepared sauces,** such as barbecue sauce and ketchup. These are often high in sugar, sodium, or both.
- **Use less of high-sodium condiments,** such as soy sauce, pickles, and monosodium glutamate (MSG).

B. Cook without salt or add as little as possible.

- **If you typically use lots of salt, try cutting back gradually.** You will become accustomed to less salt over time.
- **If you must add salt, it is best to do so after the food is cooked, not during cooking.** Food will taste more "salty" with salt on it, rather than cooked into it. Try to add as little as possible. And don't put the shaker on the table.
- **If you must salt uncooked meat, add no more than 1/4 teaspoon per pound.**
- **Season meats with herbs and spices or blends of herbs and spices,** such as "Italian Seasoning." Read the label and avoid those with salt as a major ingredient.
- Salt is not necessary when cooking pasta, rice, and hot cereals. **Try cooking pasta or rice in unsalted broth or unsalted tomato juice.**

C. Modify recipes to reduce the amount of salt or sodium or try new recipes for low salt/ low sodium substitutes.

- **Make your own lowfat, low-sodium condiments.** For example, try making your own salsa by mixing diced fresh or "no-salt-added" canned tomatoes with diced onions, green peppers, and chilies. Develop a recipe that suits your taste by adding cummin, cilantro, garlic, and/or lime juice.

- **If using ham or other cured meat in a recipe, omit salt** and avoid using other ingredients high in sodium.

- **Use onion and garlic powder rather than onion salt, garlic salt, and other seasoning salts.**

- **Reduce or omit salt when using salted processed foods** such as canned vegetables or soups in recipes. For example, reduce or omit salt from pasta and rice casseroles when using cheese, canned soup, or canned vegetables. Try "no-salt-added" canned vegetables.

- **Sodium is a part of salt and most leavening agents like baking powder and baking soda.** You can usually **reduce the amount of these ingredients** and still make a good quality product. Use 1 1/4 teaspoons baking powder per cup of flour in biscuits, muffins, or waffles. Use 1 teaspoon baking powder per cup of flour in cakes.

- **Use 1/4 teaspoon salt per cup of flour in yeast breads.** (In yeast breads, salt helps to control the action of the yeast.) Use only half the amount of salt called for in baked products other than yeast breads.

- **Do not reduce the salt in recipes for cured meats or pickled or brined vegetables. In this instance salt is acting as a preservative.** (Remember: Home canned or cured foods are not credible for reimbursement by the Child and Adult Care Food Program.)

One Provider's Story:
How Amy Limits Sodium

Amy has been a family day care provider for about 10 years. She loves her career and is very active in the professional provider association in her area. Currently Amy cares for 4 children and is working on filling some vacancies.

Amy began limiting salt and sodium for her family long before it became a concern to the general public. About 20 years ago her husband was diagnosed with high blood pressure. The physician recommended a low-sodium diet as part of the treatment for his condition. For Amy, who did most of the cooking, it was easier to put the entire family on a low-sodium diet than to cook two separate meals. In addition, Amy wanted to lower the risk of other members of the family developing high blood pressure. She changed her shopping, food preparation, and eating habits. Within a year or two her new healthier habits had become second nature, and her family could hardly remember when they ate differently.

According to Amy, the most important thing she learned in terms of reducing the sodium in her family's diet was how to read food labels. She pointed out that unless you really look for sodium in foods, it often goes unnoticed. For example, she was surprised to learn that some cheeses are high in sodium. If she had relied upon a salty taste to tell her, Amy says she would never have known.

When I imagined Amy grocery shopping, I pictured her spending hours going up and down isles reading the label of every food product she selects. Amy assured me that that was not an accurate picture. She admitted that for a while reading labels did slow her shopping down some. But now she knows what products to buy without having to read the labels. And it is not as complex as it sounds. For example, she never reads food labels for vegetables. She knows that canned vegetables are higher in sodium than frozen, so when fresh is not available, she automatically buys the frozen. That was a pretty easy thing for her to remember and it made a big difference in the amount of sodium her family consumed. Amy knows her grocery store shelves well. She has learned what products are high in sodium and what products are low in sodium. The only time she needs to read the labels now is when she is considering purchasing a new food item, or one that she usually does not purchase.

Just out of curiosity, I asked Amy how she seasoned her vegetables. I was a little concerned that she be might be substituting more high-fat seasonings, like butter, for the salt she was eliminating. She said that sometimes she serves vegetables without any seasoning at all. Other times she uses lemon juice and herbs like oregano, dill, basil, and tarragon. Amy says that she and the children just experiment until they finds a taste that they like. In fact, experimenting with herbs has become a favorite activity in her day care home.

Amy had always wanted a vegetable garden but really did not have the time or the space. She decided to plant a few herbs in her flower beds and a few in pots which she placed on her patio. If nothing else, she thought the children might enjoy watching the herbs grow. Now the children have learned to identify most of the herbs she planted. Sometimes Amy pinches off a leaf, has the children close their eyes and try to identify the herb by its smell. Much to her surprise some of the children have gotten pretty good at it. Sometimes Amy allows each child to pick the herb to use in seasoning a vegetable on their plate. The children not only enjoy this activity, but it seem that they eat more vegetables as a result.

When Amy reduced the salt and sodium in the meals she serves she introduced the children to a new world of herbs and spices. The children she cares for are learning about taste and smell. They are being adventurous with their diets. They are also learning how plants grow and how to care for them, and that food does not originate on the grocery store shelves. Amy has done a remarkable job of making healthy eating fun.

GOAL 1:

My action plan for meeting this goal:

(Hint: Include what you will do and how often or when.)

GOAL 2:

My action plan for meeting this goal:

(Hint: Include what you will do and how often or when.)

GOAL 3:

My action plan for meeting this goal:

(Hint: Include what you will do and how often or when.)

GOAL 4:

My action plan for meeting this goal:

(Hint: Include what you will do and how often or when.)

GOAL 5:

My action plan for meeting this goal:

(Hint: Include what you will do and how often or when.)

Modifying Recipes: Understanding The Purpose of 4 Key Ingredients

Supporting Information
For The Provider Who Wants To Know More

Whether you are modifying recipes to fit the dietary guidelines, or creating your own nutritious recipes, a certain amount of experimentation is required. Sometimes it takes a few tries before you feel you have created the perfect nutritious recipe. Understanding the purpose of certain key ingredients in recipes could increase your chances for early success.

The following information lists the functions of four major ingredients that often need to be changed if you are making a recipe more nutritious. Whether you are trying to limit calories, lower fat and cholesterol, increase fiber, or reduce sugar, these ingredients are probably involved. In some cases, you will be eliminating or reducing an ingredient. In other cases, you will be experimenting with a more nutritious substitute for an ingredient. **Knowing the purpose of these ingredients will help you to anticipate what effect these changes will make on the recipe you are preparing.** This information will also help you to diagnose what went wrong if the recipe does not turn out as you had planned.

Fat (Butter, Margarine, Shortening, Lard):

- provides flavor and richness
- improves texture and tenderness in baked goods
- promotes flakiness and lightness
- promotes smoothness and creaminess

Eggs:

- provide structure, elasticity and richness
- act as a thickener and hold the other ingredients together
- help ingredients to rise when the eggs are beaten

Sugar:

- provides flavor, volume and texture
- increases tenderness and browning in baked goods
- acts as a preservative in jams, jellies and pickles
- feeds the yeast and allows it to multiply and grow

Sodium (Salt):

- provides flavor
- acts as a preservative in cured meats and in brined or pickled vegetables
- controls the action of yeast

Source: Service in Action, no. 9.316, Colorado State University Cooperative Extension. Fort Collins, Co.

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Cooking To Conserve Nutrients

Supporting Information
For The Provider Who Wants To Know More

The nutritional value of foods depends in part on how you cook or prepare them. The following suggestions will help you to get the most from the foods you serve.

- **Steam vegetables** rather then boiling or use as little water as possible.
- **Peel vegetables after they are cooked.**
- **Do not cut vegetables into small pieces for cooking.** Do not cut them at all until you are ready to use them. The air destroys vitamin C.
- **Do not overcook vegetables.** Vegetables are ready when they are tender to the fork and still somewhat crisp.
- **Save cooking water** from vegetables and meat stocks to use in soups.
- **Serve vegetables and fruits raw when you can.** Keep them chilled until you are ready to use them so that they retain their vitamin C.
- **Try to time meals so that hot foods are not held for a long time before serving.**
- **When possible, cook in a cast iron skillet.** Iron skillets release iron which our bodies can use into the foods that are cooked in them.
- **Don't cook dry beans or dry peas with baking soda, or use baking soda to improve the color of vegetables.** This creates a condition which destroys B vitamins and adds sodium.
- **Thaw frozen juices in the refrigerator.** When juices are allowed to thaw on the counter, they may get warm. Heat destroys vitamin C.
- **When possible, buy milk in containers that don't let in light.** In other words, buy milk in cartons rather than in clear plastic jugs. Light can affect the potency of the B vitamins. Even though you are storing your milk in a dark refrigerator, it was probably exposed to light while being stored in the refrigerated section of the grocery store.
- **Store whole grain flours in the refrigerator.**
- **Do not wash rice before cooking or rinse cooked pasta. It washes away nutrients.**

CHAPTER 4

HUNGRY BODIES, HUNGRY MINDS: RECIPES AND LEARNING ACTIVITIES FOR CHILDREN

INTRODUCTION...

In the introduction you will read about:

influences on children's eating habits and food preferences | page 2
and involving children in food preparation | page 3

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The eating habits and attitudes about food that children develop during their preschool years often last throughout their lives. Research suggests that when those eating habits are nutritious and the attitudes are positive, the result may be healthier adults with a lower incidence of chronic disease. It is very important for you as a provider to take your role in helping children develop healthy eating habits seriously. You may be the only person in some children's lives who is able to give this aspect of their development special attention.

Influences on Children's Eating Habits and Food Preferences

All children have their likes and dislikes when it comes to food, and there is no doubt that these food preferences are real. But they are also to a large extent learned.

Many factors influence children's likes and dislikes. Anyone who has watched even a few minutes of Saturday morning cartoons can testify to the fact that food manufacturers spend millions of dollars advertising foods to children. Unfortunately, these foods are often times not the nutritious foods we would like our children to eat. There are also fast food chains which entice children by including toys or games with special children's meals. Parents, friends, and older brothers and sisters also play a big role in the development of children's eating preferences. Parents usually show their likes and dislikes by not offering the foods they don't like. Siblings and friends can be a little more obvious when it comes to expressing their likes and dislikes. When an older sibling or an admired friend "yuk's" a food, it may be doomed, at least for a while. On the other hand, if they like the food, their eating it may convince others to try it.

There are also a variety of ways that you as a child care provider influence the food preferences of the children in your care. One way is through the message you give when you offer foods. Unfortunately, many of us are guilty of making statements like "I know you probably won't like this but try one bite." or "Now this is something new. At least try it." Others of us have been known to actually try to bribe children by telling them that if they eat the food they find less desirable, often the vegetables, we will l eat them have the food they find more desirable, often the dessert. This sends the message that one food is better than the other and in this case specifically, that we don't really expect them to like vegetables. Some signals are more subtle than these. For example, we might serve some foods with an expression of delight, like we know the children are going to love it, and other foods with an expression of dread, like we know it will take some pleading to get them to even try it. Even though these messages are subtle, children learn from them.

You also influence children's preferences by the example you set when you eat. In other words, if you don't eat your vegetables,

they probably won't eat theirs. The old "Do as I say, not as I do" just isn't very effective. If this sounds familiar to you, let your role as a family day care provider be an incentive for your improving your own eating habits. Your health also matters. Good nutrition is just as important for you as it is for the children in your care.

One of the biggest ways you influence the food preferences of the children you care for is by choosing to offer or not to offer certain foods. How many of you have looked at a recipe and thought "My children would never eat that," or made the statement "Children just don't like vegetables?" It is true that children are usually reluctant to try foods that are new and different, but that does not mean they won't ever like them. **Research shows that many children have to be offered a food 8 to 10 times before they really begin to like it.** Many of you would have given up on the food long before preparing it the 8th or 10th time. However, a food has no chance of becoming a favorite if you don't give children a chance to discover how good it is. Just as an exercise, look at your menus for the past month and ask yourself what you are not serving. **You have to suspend your notions of what children will and will not eat and be adventurous in your food offerings.**

Remember, when it comes to children and their food preferences, if they don't like a food cooked one way, they may like it cooked another way, or, if they don't like it cooked, they may like it raw; if they did not like it last week, they may like it this week. It is normal for children to have food preferences, and you should respect their preferences. But you also need to make certain that you have given them every opportunity to discover new tastes and develop healthy food preferences. There is something you can do that will increase their willingness to try new foods.

Involving Children in Food Preparation

One of the best ways to get children to try new food, is to involve them in the food preparation. By increasing their exposure to a new food they are more willing to try it, and therefore more likely to develop healthy eating habits and positive attitudes toward food. There are also other benefits to involving them in preparation. One of the most important benefits is that **children enjoy it.** It helps to create a relaxed mealtime atmosphere and can be a good way to move from more active play to quiet dinning. Involving children also **gives you good opportunities to teach them about nutrition.** Even one year olds can learn that food gives them energy to play, helps them to feel good and helps them to develop healthy bones, teeth, hair, skin and muscles. Two year olds can begin to identify foods by name and explore differences in taste and smell. Three and 4 year olds can begin to understand the concept of food groups, place foods in their appropriate groups, and construct a balanced meal. **Participating in food preparation also teaches children about responsibility, cooperation and sharing. It helps them gain a sense of independence and competence.**

Foods and mealtime activities can also be used to help children develop in other ways. If you are like most providers, you spend a large portion of your day preparing meals or snacks, serving them, or cleaning up afterwards. It takes a big portion of the children's day as well. Make that time learning time. Consider the following suggestions:

1. Use mealtime to teach language skills:

- Increase their vocabulary by teaching them the names of foods and terms used in cooking.

- Use foods to teach colors: What foods are red, green, white, purple, yellow, orange, or brown?
- Use foods to teach textures: Is this food crunchy, crispy, smooth, dry, juicy?
- Use foods to teach flavors: Does this food taste salty, sweet, sour, bitter, spicy, bland?
- Use foods to teach shapes: Is this food round, square, oval, rectangular, long, short, flat?
- Use foods to teach smell: Does the food have a strong smell when it is cooking? Can you identify this food by its odor?

2. **Use foods and mealtime to teach children math skills:**
   - Use foods to help them to understand the concepts of bigger vs. smaller, more vs. less, same vs. different, heavy vs. light.
   - Use food preparation to help them understand time sequence, before and after, 1st, 2nd, 3rd.
   - Use foods to help them understand sorting, matching, measuring and counting. For example, count the number of different foods on the table, put all of the fruits on one platter, count the number of seeds you find in an orange.

3. **Use food and food preparation to develop science skills:**
   - How are foods changed by heat and cold?
   - Where does food comes from? How does it grow? How is it processed and transported?
   - What are the different parts of plants that we eat? What part of the plant is a potato, a bean, a lettuce leaf, broccoli?
   - What are the similarities and differences between foods? How do we divide them into food groups? Name a food from each group.

4. **Use food preparation to help them develop social skills:**
   - Help them learn to share.
   - Teach them about taking turns.
   - Help them to understand the benefits of team work and cooperation.

5. **Use food preparation to help them develop their motor skills and eye/hand coordination.**
   - Help them learn to use utensils properly.
   - Provide them with appropriate activities. The following chart will help you determine what a child can do at a particular age.

What can children do?

Most 2 year olds can:

shake
wipe
tear
snap
arrange
dip
break

Most 2 1/2 year olds can:

push buttons
help set the table
slice soft foods with a plastic knife
spread
scrub

Most 3 year olds can:

pour
roll
scoop
mix
wrap
sort

Most 4 year olds can:

grate
peel
measure

Children of all ages can learn to recycle.

This chapter is not meant as a complete cookbook. However, **because the foods you offer are such a big part of how children learn about food and develop healthy eating habits, we are providing you with several recipes.** In selecting recipes to include in this chapter we first looked at provider menus to get an idea about foods commonly served. Then we looked for the more nutritious versions of those foods. We also included many recipes aimed at increasing variety and others just because they sounded delicious. **The Child and Adult Care Food Program credits are given for each recipe.**

Activities for teaching children about nutrition are also included in this chapter. We hope that these suggestions will inspire your creativity and help you to think of others. **We also offer options of ways the children can be involved in the preparation of each of the recipes. Refer to the information on "what can children do?" to help you decide if the activity is right for the children in your home.**

In order to make involving children in food preparation more fun for you and them, consider the following:

1. **Make sure the tasks you are giving them are appropriate for their age.** Giving children tasks they are not physically ready for will be frustrating for both of you. If the tasks we suggest are not right for your children, think of other ways they can help. (Don't forget setting the table and cleaning up.)

2. **Be safe: Establish rules about safety during children's participation in the kitchen.** For example, you may want to establish a "no children zone" in the area nearest the stove. Talk about things that could be hot, things that could cut, and how to correctly use each utensil.

3. **Pick an activity appropriate for the number of children in your care.** Some activities require more supervision than others. Make sure you can supervise all of the children sufficiently. Make sure everyone can participate in the activity. Children can get impatient. Plan activities that don't keep them waiting too long for their chance to help or encourage them to push in order to see what is happening.

4. **Be prepared. Gather all of the ingredients and utensils you will need before you gather the children.** In some cases it will be dangerous for you to leave children unsupervised. It will be easier for you to relax and enjoy watching the children learn and experience new things if you know you are prepared.

5. **Allow extra time. Realize that the children's help will not necessarily mean the job will go quicker. It may mean just the opposite.** However, this is not just about preparing the snack or meal anymore. It is a learning activity. **The point is to learn and enjoy learning while preparing the snack or meal.**

6. **Don't demand a perfect product.** The hamburger patties may not be perfectly round, the lettuce torn a little too small, and there may be almost as much peanut butter on the handle of the spoon as there is stuffed in the trough of the celery. The children will remember the fun they had much more than they will remember the appearance of the meal. And the only way they will get better is through experience.

7. **Encourage the children to tell their parents about what they ate and how they helped to prepare it.** This will help the children to develop verbal skills and it will help you in communicating to the parents how well their children are doing . It will also give the parents an opportunity to praise their child and to reinforce the lessons you teach them. It may also encourage the parents to expand their food offerings at home.

8. **Begin every activity with hand washing.**

We hope that as a result of this chapter, you will begin to look at the recipes in your recipe file with two questions in mind:

1. How can I make this recipe more nutritious?

2. How can I involve the children in preparing it?

Remember:

You play a big role in defining the child's food world.

Make it a big and varied world.

Recipes and Activities...

Note:

The creditable meal component for the Child and Adult Care Food Program is given for each recipe in this section. However, Child and Adult Care Food Programs differ somewhat from state to state. Your state may credit a food differently than we have credited it in this book. Read the recipe with the rules of your particular Food Program in mind. If you have questions or are not sure how to credit a recipe, call your food program sponsor organization and ask them.

Also be sure to put the ingredients you are crediting on your meal forms and not just the name of the recipe.

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Hamburgers:

Hamburgers can be tasty and nutritious but they can also be high in saturated fat and cholesterol. When served with french fries, the fat really adds up. **Here are some ways to reduce the fat in hamburgers.**

For a better **Basic Burger:**

1. **Select lean ground beef.** Generally, the lighter the color, and lower the price, and the more fat has been ground up with the meat. Ground chuck is usually lower in fat than ground beef, and ground round and ground sirloin are even leaner.

2. **When cooking hamburger patties, place them on a rack sprayed with nonstick vegetable oil spray and broil.** (The rack allows the grease to drip away from the patties.) To remove even more of the grease, allow the cooked patties to drain on paper towels before serving.

To make a burger even lower in fat:

Use lean ground turkey instead of ground beef. Not all ground turkey is lean. Unless the package specifies ground turkey breast, you should assume that the skin and other turkey parts are included. In this case the ground turkey may be leaner than some ground beef, but not leaner than ground chuck, ground round, ground sirloin, or even ground beef labelled extra lean. If you are buying ground turkey ground fresh at your grocery store, ask the butcher what parts of the turkey were used. If you have a food processor, you might want to buy turkey breasts, remove the skin, and grind it yourself. Turkey can be substituted for ground beef in most recipes .

Here are hamburger recipes which use ground turkey. When you make the burger patties, consider doubling the recipe and storing the extra patties in the freezer for next time.

TURKEY BURGERS

(Makes 4-5 patties.)

ground turkey breast	1 pound
oat-bran cereal	1/4 cup
garlic clove, minced	1 large
onion, finely chopped	1/4 cup
green pepper, finely chopped	1/8 cup
salt or sodium-alternative seasoning	1 teaspoon

Mix all the ingredients together and form into patties. Spray rack with nonstick vegetable oil spray (such as Pam), place patties on rack, and broil. Serve on a bun with your favorite garnishes.

Child and Adult Care Food Program (CACFP) meal component credit: meat

ORIENTAL TURKEYBURGERS

(Makes 4-5 patties.)

ground turkey breast	1 pound
oat-bran cereal	1/4 cup
low-sodium soy sauce	1 tablespoon
powdered ginger (or try freshly grated ginger)	1/2 teaspoon
powdered coriander	1/2 teaspoon
water chestnuts, chopped	1/4 cup

Mix all ingredients in a large bowl and form into patties. Spray rack with nonstick vegetable oil spray, place patties on rack, and broil. Serve with rice and stir-fry vegetables.

CACFP meal component credit:
meat

TURKEY PIZZABURGERS

(Makes 4-5 patties.)

ground turkey breast	1 pound
oat-bran cereal	1/4 cup
parsley, finely minced	1/4 teaspoon
oregano	1/4 teaspoon
marjoram	1/4 teaspoon
chopped onions	1/4 cup
grated lowfat or part-skim mozzarella cheese	
tomato or pizza sauce	4 tablespoons
English muffins, split	2

Mix turkey, cereal, herbs, and onions and form into 4 patties. On a pan sprayed with non-stick vegetable oil spray, fry patties until browned. Sprinkle with grated cheese, cover, and cook until the cheese is melted. While the burgers are cooking, spread 1 tablespoon of tomato or pizza sauce over each English muffin half. Place the cooked burgers on the muffins. Place in the preheated 350 oven and bake for 3 minutes.

CACFP meal component credit:
bread and meat

You can make hamburgers without any kind of meat at all. The following recipe uses brown rice instead of ground beef or turkey.

BROWN RICE CHEESEBURGERS

(Serves 4-6.)

large onion, finely chopped	1
minced parsley	1/2 cup
garlic, minced or mashed	3 cloves
finely-chopped celery	1 cup
polyunsaturated vegetable oil,	6 tablespoons
cooked brown rice	4 cups
coarsely-grated carrots	2 cups
eggs, beaten	2 large
whole-wheat flour	1/2 cup
grated cheddar or jack cheese	
Salt and pepper to taste	

Saute onion, parsley, and celery in 3 tablespoons of oil for 10 minutes. Mix with brown rice, carrots, eggs, and whole-wheat flour. Salt and pepper to taste. Form into flat patties of whatever size you prefer. Add more flour if patties are too soft. Fry in remaining oil, over medium heat, until each side is golden brown. Top with grated cheese.
(Source: Sharing in the Kitchen, Sharon Cadwallader.)

CACFP meal component credit:
meat alternate

Try serving hamburgers on whole grain buns.

Give children lots of choices of garnishes for their burger. Consider offering vegetables like bell pepper slices, shredded carrots, sprouts etc.

Children can help by:

- **forming the meat or brown rice mixture into patties.** After the children have washed their hands, let them put sandwich bags on their hands for gloves. Provide them with a clean surface and let them take a bit of the meat or brown rice mixture and make a ball. Then have them flatten the ball into a patty. (Try to remember whose patty is where when you cook them. The children will want the patty they made with their own hands.) Children as young as two should be able to participate in this activity. This is also a good opportunity to teach children about shapes. Let them name other foods that are round and foods that are flat.

- **arranging the garnish tray.** Let the children make the garnish tray by arranging the lettuce, tomatoes, onion, pickles and other items.

- **washing and tearing lettuce**. Each child can pick his or her own lettuce leaf, wash it, tear it to the size they want and have it ready for building the burger.

- **spreading condiments**. Let the children select their own condiments and spread them with either a plastic knife or a spoon. What colors are these condiments? What other foods are these same colors?

- **building their own burger**. This activity is a good opportunity to help children understand a variety of concepts. For example, what did you put on top, what did you put on the bottom, what did you put in the middle. What goes on your burger first, second, third. What food groups are included in your burger? Name the different vegetables that you used to make your burger. Identify the different colors of the foods included in your burger. Let the children decide what ingredients to put on their burgers. Cut the burgers in half before they garnish them and encourage them to garnish each side differently and compare the tastes.

FRENCH FRIES

Most providers are familiar with packaged oven fries. Fries prepared in the oven contain less fat and are easier and less messy to prepare than french fries fried on top of the stove. Oven fries also eliminate the danger associated with frying foods while trying to watch and care for children. If you are forced to leave frying foods unattended, even for a minute, to attend to a child, you risk a grease fire or a child somehow being burned by the hot oil. Because of these dangers, we recommend that you not fry foods while you are caring for children. Instead, try these recipes for oven fries and cheesy oven fries.

OVEN FRIES

(Serves 3-4.)
2 large potatoes
oil, salt, pepper

Scrub potato skins well and dry them (do not peel). Cut each potato in half and then into finger-sized pieces (about 1/2 inch in diameter). Spread on a shallow baking pan and dribble oil over all of the pieces. Turn them so that all sides are coated, and salt and pepper lightly. Bake in preheated 400 oven for 30 to 45 minutes, or until tender. Turn potatoes with a spatula several times during the cooking.
(Source: Sharing in the Kitchen, Sharon Cadwallader.)

CACFP meal component credit:
1 vegetable

Children can help by:

- **scrubbing the potato skins.** Give them a brush and a pot or pail of water and watch them go to work. Talk to them about where potatoes grow. Can they name another vegetable that grows in the ground?

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CHEESY OVEN FRIES

(Makes 4-6 servings.)

potatoes, medium	3
Parmesan cheese, grated	1/3 cup
salt	3/4 teaspoon
garlic powder	3/4 teaspoon
paprika	3/4 teaspoon
margarine, melted	3 tablespoons

Wash potatoes well and cut each into 8 wedges; set aside. Combine Parmesan cheese and next three ingredients, stirring well. Dip potato wedges in melted margarine; arrange in a single layer in a lightly greased 15- X 10- X 1-inch pan. Sprinkle cheese mixture over potatoes. Bake at 375, uncovered, for 40 minutes or until potatoes are tender and browned. (Source: Southern Living Magazine, August 1991)

CACFP meal component credit:
1 vegetable

Children can help by:

- **scrubbing potato skins.** Talk about where potatoes grow and why it is important to scrub them. After the children have scrubbed the potatoes, ask them to find the biggest potato and the smallest potato.
- **sprinkling the cheese mixture over the potatoes.** Do they know what "to sprinkle" means? Show them by sprinkling water on their hands.

More Fun: Food Experiments

Here are three experiments you can do with items you probably already have in your home.

Watching Beans Sprout

Soak a handful of dry beans, at least one bean per child, in water overnight. The next day let each child pick a bean. Instruct them to fold a wet paper towel, lay the bean on it and then put it in a zip lock bag. Seal the bag and tape it to the window. As long as the paper towel stays moist the beans will sprout and grow. Eventually you will have to open the bag and give the sprout more room.

Use this experiment to talk with children about the parts of a plant or the way plants grow. Plan a menu that includes both salad and dry beans. Let them put their bean sprouts in their salad. Talk about how beans and bean sprouts are different and what they have in common.

Watching Celery Absorb Water

Plants need water just like we do. This experiment shows children how a plant absorbs water. If the children are old enough to understand the parts of a plant, you can use the experiment to show them how the stem or stalk carries water from the roots of the plant to its leaves.

Cut and wash 2 or more celery stalks. For each stalk of celery, partially fill a glass with water. Put about 1 teaspoon of food coloring in each glass. (For fun, make each glass a different color.) As the celery absorbs water, the color will move up the stalk.

Making Butter

In this experiment children use heavy cream to make butter. What animal gives us milk? What other food products do we make from milk? To make butter we shake or churn milk. What do we do to make ice cream?

For this experiment you need 1/2 pint of heavy cream, a marble which you have sanitized, and a clear pint size plastic container with a tight fitting lid. Put the cream in the jar with the marble and put the lid on tightly and securely. Make sure no leaking can occur. Let the children take turns shaking the container. (This is also a good opportunity to discuss the concepts of teamwork and taking turns.) At first you will hear the marble moving. Then the cream will become so thick that you won't be able to hear the marble moving. Then the butter will form. Drain the butter from the buttermilk. (Offer the children a taste of the buttermilk.) Wash the butter with cold water to remove any trapped buttermilk and pack it down. Store the butter in the refrigerator and serve it later on a cracker. Better yet, spread butter on a piece of toast. What happens when the butter gets hot?

Source: Some of these ideas were taken from Science Experiments You Can Eat by Vicki Cobb, 1972, Scholastic, Inc.; New York. Many of the experiments in this book are more appropriate for younger school age children. However, some of them can easily be adapted for preschoolers. In addition, the book will probably inspire you to create your own food experiments.

Other Popular Uses for Ground Meat:

Ground turkey can be used in place of ground beef for the following recipes. Especially in spicy dishes like chili, you probably will not notice the difference. Remember to drain the grease from the ground meat or turkey before adding the other ingredients.

QUICK CHILI

(Makes 4 servings, about 3/4 cup each.)

Lean ground beef	1/2 pound
Kidney beans, drained (save liquid)	15-1/2-ounce can
Bean liquid	1/3 cup
"No-salt-added" canned tomato puree	1 cup
Instant minced onion	1 tablespoon
Chili powder	1-1/2 tablespoons

Cook beef in hot fry pan until lightly browned. Drain off fat. Stir in remaining ingredients. Bring to a boil. Reduce heat, cover, and simmer 10 minutes.

(Source: Shopping for Food and Making Meals in Minutes Using the Dietary Guidelines. U.S. Dept. of Agriculture, Human Nutrition Information Service.)

CACFP meal component credit:
meat and 1 vegetable

Children can help by:

- **measuring the ingredients.** Letting the children measure ingredients helps to develop their math skills and their hand-eye coordination. The younger children will have an easier time measuring cups than teaspoons or tablespoons. The smaller utensil is more difficult for them to handle. You may want to let them measure and pour into a container that does not contain the recipe. Then you can pour the measured ingredients into the cooking food. This will safeguard against their adding the wrong amount of something to your recipe and keeps them safely away from the heat source.

- **setting the table.** Even the youngest children can help set the table. Consider making place mats and drawing the plate, fork, spoon and glass to indicate where they should be placed on the table. This will help children learn where to place items.

TACO

taco shells	6
Quick Chili (see recipe on page 25.)	
cheddar cheese, grated	
lettuce, chopped	
tomato, chopped	
salsa	

Heat the taco shells if desired. Fill taco shells with quick chili (or one of the variations listed below) and top each with lettuce, tomato and cheese. Add salsa to taste.
Variations: Try using pinto beans, black beans, chicken or ground turkey in the place of quick chili.
(Source: Shopping for Food and Making Meals in Minutes Using the Dietary Guidelines, U.S. Dept. of Agriculture.)

CACFP meal component credit:
meat and bread

Children can help by:

- **building their own tacos.** Let the children spoon the chili or other taco filling into the taco shell and add the toppings. Make sure the filling is not too hot. Let them do this over their plates so they can eat their mess.

- **rinsing and tearing the lettuce.** While the children are rinsing the lettuce, explain why washing it is important. Talk about how lettuce grows.

- **grating the cheese.** Be sure that you show children how to use the cheese grater safely. Give them a large piece of cheese to grate from so that they don't grate their fingers. You may also want to invest in a plastic grater. It is safer to use than the metal grater.

MEAT LOAF WITH SPINACH AND OATS

(Makes 8 servings.)

Whites from 2 large eggs or 1 whole egg

water	3/4 cup
old-fashioned or quick oats, uncooked	3/4 cup
extra-lean (93 percent) ground beef	1-1/2 pounds
spinach, frozen chopped, thawed and squeezed dry	1 package (10 ounces)
chopped onion	1/2 cup
Dijon mustard	1 tablespoon
dried thyme	1 teaspoon
salt	1 teaspoon
pepper	1/2 teaspoon

Heat oven to 350 degrees F. Have ready a 9x5x3-inch loaf pan. Mix egg whites (or whole egg), water and oats in a large bowl. Let stand about 5 minutes. Add remaining ingredients and mix with hands or electric mixer on low speed just until blended. Press mixture into loaf pan. Bake 50 to 60 minutes until meat loaf is no longer pink in the middle. Remove from oven, cover loosely with foil and let stand 10 minutes. Drain off any juices in the pan before serving. Try using leftover meat loaf, sliced, on a sandwich of whole wheat bread.

(Source: Woman's Day, 8/11/92.)

CACFP meal component credit:
meat and 1 vegetable

Children can help by:

- **measuring the oats.** Oats are a relatively easy food for children just learning to measure. If the oat container is too big for a child to handle, let them spoon the oats into the measuring cup.
- **squeezing the water from the spinach.** Warning: this could be messy. If you decide to let your children try it, make sure they have clean hands. You may want to have them wear sandwich bags on their hands for gloves.

- **mixing ingredients.** Mixing is a good activity for even the youngest of children. If you use an electric blender you can let them turn it on and off. Explain safety issues while you are watching the blender work. Children can also mix the ingredients with their hands or stir with a large spoon. Be sure their hands are clean.

- **scooping the meatloaf mixture into the loaf pan.** Let them spoon the mixture into the loaf pan or, wearing sandwich bags, scoop it in with their hands. Count how many spoonfuls or handfuls it takes.

INDIVIDUAL MEATLOAVES

Children sometimes enjoy having their own little loaf. You can also use the other meatloaf recipe to make individual meatloaves. Try cooking them in muffin tin to give them a muffin shape.
(Makes 4 servings, 1 loaf each.)

Wheat crackers, crushed	1/3 cup
Instant minced onion	1 tablespoon
Skim milk	1/3 cup
Egg	1
Basil leaves	1/2 teaspoon
Salt	1/8 teaspoon
Lean ground beef or turkey	3/4 pound

Preheat over to 375 degrees F (moderate). Soak crackers and onion in milk until soft and milk is absorbed. Add egg and seasonings. Mix well. Gently mix ground beef with milk mixture. Shape into four individual loaves, about 3-1/2 inches by 2 inches by 1-1/4 inches. Place in shallow baking pan. Bake 25 minutes or until done. Drain off fat.
(Source: Shopping for Food and Making Meals in Minutes Using the Dietary Guidelines, U.S. Dept. of Agriculture.)

CACFP meal component credit:
meat

Children can help by:

- **crushing the crackers.** Children can find lots of ways to crush crackers. One way they might enjoy is to give them a clean plastic glass and let them roll the glass back and forth over the crackers. They can hear and feel the crackers being crushed under the plastic glass.

- **mixing the ingredients.** Give them a big spoon or let them use clean hands. Ask them to name the ingredients used. What ingredients can they see as they mix?

- **shaping their individual meatloaf.** Let each child shape his or her own individual meatloaf and place it in the baking dish. Talk about different shapes, round vs. square or rectangle. Find an object about the size specified in the recipe (3-1/2 inches by 2 inches by 1-1/4 inches) that the children can use as a model. Ask them to try to make their meatloaf about that size and shape.

ALOHA MEATBALLS

(Makes 4 servings, 3 meatballs plus 3/8 cup fruit and sauce each.)

Individual meatloaf mixture (see above)	1 recipe
Pineapple chunks, juice-pack	8-ounce can
Worcestershire sauce	1-1/2 teaspoons
Garlic powder	1/8 teaspoon
Pepper	Dash
Green pepper, cut into 1-inch pieces	1/2 cup
Cornstarch	1 tablespoon
Water	1 tablespoon

Shape meat mixture into 12 balls. Brown in hot frypan about 10 minutes; drain. Drain pineapple; save juice. Add water to juice to make 3/4 cup liquid. Add liquid and seasonings to meatballs. Bring to a boil, reduce heat, cover, and cook for 5 minutes. Add pineapple chunks and green pepper. Cook 1 minute longer. Mix cornstarch and water until smooth; add to mixture. Cook until thickened, about 2 minutes. Stir as needed. Serve over rice.

(Source: Shopping for Food and Making Meals in Minutes Using the Dietary Guidelines, U.S. Dept. of Agriculture.)

CACFP meal component credit:
meat and 1 fruit/vegetable

Children can help by:

- **shaping the meat mixture into balls.** Each child can participate in this activity. Talk to them about shapes (round vs. square) and size (some meatballs are bigger than others, some meatballs are smaller than others.) Count the number of meatballs each child makes.

GREEK MEATBALLS

Lean ground beef or turkey	1-1/2 lbs.
Rice	1 cup
Chopped yellow onion	1 tablespoon
Chopped parsley	2 tablespoons
Dried dill	1/2 tablespoon
Egg	1
Flour	
Tomato juice	2 cups
Water	4 cups
Butter	2 tablespoons

Mix the hamburger with the rice, yellow onion, parsley, dill, and egg. Mix and mold into small meatballs. Roll each in flour. In a large frying pan place the tomato juice and water. Bring to a heavy simmer, and add the butter. Gently drop meatballs into this sauce, cover, and simmer for 45 minutes.
(Source: The Frugal Gourmet, Jeff Smith.)

CACFP meal component credit:
meat and 1 vegetable

Children can help by:

- **measuring ingredients**. This recipe calls for several ingredients that require measuring. However, with some recipes there may be only one ingredient for children to measure. Even then you can sometimes let all the children participate by dividing the amount of the ingredient called for among the children. For example, this recipe calls for 1 cup of rice. If you are caring for 4 children you can let each child contribute 1/4 cup.

- **adding and mixing ingredients.** Let the children smell the onion, parsley, and dill before adding it and mixing it with the other ingredients. Have them close their eyes and see if they can identify the ingredient by its odor.

- **molding the mixture into balls.** Have them point out other objects in the kitchen that are round. Have them put the meatballs in a row. How many meatballs are there? How many rows?

- **rolling the meatballs in flour to coat them.** Talk to them about how round things roll and square things do not. Have them name other round things that roll.

STOVETOP TAMALE PIE

(Makes 4 servings, about 1 cup each.)

Quick Chili (See page 25.)	1 recipe
"No-salt-added" whole-kernel corn, undrained	8-ounce can
Yellow cornmeal	1/2 cup
Salt	Dash
Cold water	1-1/4 cups
Chili Powder	1/8 teaspoon

Place chili in a 10-inch frypan. Stir in corn. Heat thoroughly. As chili heats, mix cornmeal and salt with water in a saucepan. Cook over medium heat, stirring constantly until thickened, about 2 minutes. Spread cornmeal mixture over hot chili to form a crust. Sprinkle with chili powder. Cover and cook over low heat, with lid slightly ajar, until topping is set, about 10 minutes.
(Source: Shopping for Food and Making Meals in Minutes Using the Dietary Guidelines, U.S. Dept. of Agriculture.)

CACFP meal component credits:
meat and 1 vegetable

SLOPPY JOE (Top of the Stove Barbecue With Turkey or Beef)

(Serves 3-4.)

lean ground beef or turkey	3/4 pound
onion, finely chopped	1 small
tomato sauce	1 can (8 ounce)
water	1/4 cup
Worcestershire Sauce	1 tablespoon
red wine vinegar	1 tablespoon
salt	1 teaspoon
paprika	1 teaspoon
chili powder	1 teaspoon
cinnamon	1 teaspoon
black pepper	1 teaspoon
cloves	1 teaspoon
brown sugar	1/2 teaspoon

Brown beef or turkey and onion. Drain grease or drain grease and wash browned beef or turkey with hot water. Add all other ingredients. Simmer, covered, for 20-25 minutes.
(Source: Sharing in the Kitchen, Susan Cadwallader.)

CACFP meal component credit:
meat

Children can help by:

- **setting the table**. Set your place at the table first so that they can look at it and see where each piece of the place setting goes. Ask them to count how many will be eating lunch and how many places are set at the table. Is there a place set for everyone? Match each person with a place setting.

- **cleaning up after lunch.** Let each child clean up his or her place setting. Show the children where to scrape any food left on their plates and where to put their plates after scraping them. If you have a place where children can comfortably wash their plates, let them wash them. Sometimes a step stool can be placed in front of the sink so that children can reach comfortably. Sometimes you can place a dishpan of soapy water on a surface low enough for them to reach. After the children have washed their dishes, let them wipe up any spilled water. Talk to them about the danger of leaving spilled water on the floor.

QUESADILLAS

soft flour tortillas	12
shredded cheese (Monterey, cheddar)	1/2 cup
tomato sauce	1 can (12 ounces)
ground beef or turkey, or turkey sausage	1 pound
lettuce, chopped	1/2 head
tomatoes, diced	5-6
onion, diced	1 medium

Brown ground meat or sausage in a medium size skillet. Set aside. Preheat oven to 350 degrees. Place 6 tortillas on baking sheet. Sprinkle each tortilla with 1 tablespoon of cheese and cover with a second tortilla. Spread tomato sauce over tortillas. Drain grease from ground meat or sausage or rinse with hot water and drain. Then sprinkle tortillas with sausage or ground meat and cheese. Bake 6-8 minutes until cheese becomes bubbly. Top with tomato, onion and lettuce before serving. (Source: Tuscon Association for Child Care.)

CACFP meal component credit:
meat and bread

Children can help by:

- **arranging tortillas on the baking sheet.** Let the children count out 6 tortillas and arrange them on the baking sheet.
- **sprinkling cheese on the first tortilla and covering it with the second tortilla.** Discuss the concepts of top, bottom and middle. Let the children name what food items are where.
- **spreading tomato sauce.** Let each child spread tomato sauce on the tortillas. Where does tomato sauce come from? What else do we make from tomatoes?
- **washing and tearing lettuce for topping.** Help the children understand the concepts of bigger and smaller. What happens when you tear one big piece of lettuce?
- **adding the lettuce, tomato, and onion topping.** To which food group do tomato, onion, and lettuce belong? What parts of the plant are lettuce, tomato and onion?

More Fun : Build A Grocery Store

Children enjoy creating their own grocery stores. And once the grocery stores are created, children can use them in playing many different games. Choose a part of the play area where they can set up the grocery store and leave it for a few weeks or until they tire of it. If you have bookshelves in the play area, turn them into grocery store shelves for a few weeks. Try using shoe boxes or other small boxes, baskets, or even grocery store bags for fruit and vegetable bins. Several items can be used to stock your grocery store.

- Save food containers like unbreakable jars, boxes, and cartons. Use them to represent the foods they originally contained or glue pictures of a different food on the boxes. Ask parents to contribute by saving their clean food boxes and unbreakable containers.

- Toy stores carry a variety of plastic fruits and vegetables. Consider purchasing some of these to add to your toy collection.

- Save bags from frozen vegetables. Wash them out well, let the children stuff them with crumpled newspaper, and tape or staple them shut.

- Fold cardboard so that it stands up like a tent. Cut pictures of food out of magazines or seed catalogs. Glue a picture of the food that the tent will represent to the front of tent.

Shelves can be organized in several different ways. In fact, stocking the shelves is one of the games children will enjoy playing with their grocery store. Try some of the ideas below and add some of your own.

- Shelves can be organized by food group, with each food group getting its own shelf. For example, foods from the bread, cereal, rice and pasta group would be placed on one shelf, foods from the milk, yogurt and cheese group on another, etc.

- Foods can be grouped by color, using either the color of the package or the color of the food it contains.

- Foods can be grouped by the type or size of the package. For example, children can put boxes on one shelf, plastic bags on another, and plastic jars and bottles on another. They can arrange the items on a shelf from the smallest to the largest.

- You might also ask children to put foods they have tried before on one shelf, and foods they have never tried on another. You might then decide to try one food from the "new foods" shelf each week.

There are many different ways that you can use the children's grocery store to teach the children about foods and nutrition. Here are some suggestions.

- After a meal, ask the children to pick from the store those foods you served.
- Select all but one item for a meal and let the children select a food item to complete the meal. Help them to make a good choice.
- Have the children take turns selecting foods for lunch one day a week, or let a birthday child pick his/her birthday meal. You can help children choose foods that make a complete meal by first putting the foods in groups, and then telling the children how many foods to pick from each group. You may want to let this become a tradition in your family child care home.
- Ask the children to go to the store and purchase all of the food items you would need to make a favorite dish. For example, ask them to purchase the food items needed to make spaghetti and meatballs or fruit salad or bean burritos.
- Let one or more children pick foods from the grocery store to prepare a pretend dinner that they will serve to the other children.

You can also use the foods in the grocery store to help children learn lessons about things other than foods and nutrition. Use the foods in the grocery store to teach colors and shapes. Ask children to pick out some food items that are green, a food that is round. Use food items to teach children how to count. Use grocery games and play money or real money to teach older children how to make change.

You will probably create many fun ways the children can use the grocery store and the food items to have fun while learning. But remember, it is also important to give children plenty of opportunities for free play. Let them arrange the shelves their way and develop some games of their own. They will spend hours being creative and learning without even realizing it.

Fried Chicken:

Frying chicken in the oven, rather than on top of the stove, is better for a few different reasons. First, the chicken will be lower in fat if fried in the oven rather than in extra oil on top of the stove. Second, oven frying is a safer way to cook, especially with children in the home. Finally, frying on top of the stove can create quite a mess. Oven frying means easier clean up for you.

Here are two recipes for oven fried chicken. You can choose to leave the skin on the chicken or take the skin off before cooking. We recommend removing the skin before cooking. The skin is the fattiest part of the chicken. Removing the skin allows children to eat the crunchy coating without getting so much fat. However, even if you choose to leave the skin on your oven fried chicken, it will still be lower in fat than chicken fried on top of the stove.

THE SIMPLEST OVEN FRIED CHICKEN

(Serves 4 - 5.)

broiler-fryer chicken cut in parts and skinned	1
margarine	1/4 cup
salt	1 teaspoon
pepper	1/4 teaspoon
breadcrumbs	1/2 cup

In a small frypan, melt margarine over medium heat. Remove from heat and stir in salt and pepper. Place breadcrumbs in a shallow dish. Dip chicken, into the margarine, turning to coat; then roll chicken in breadcrumbs until thoroughly coated. On lightly greased baking sheet, place chicken in single layer. Bake at 375 F. oven for about 40 minutes or until brown and crisp. Chicken is done when fork can be inserted with ease.

(Source: The Chicken Cookbook, National Broiler Council.)

CACFP meal component credit:
meat

Children can help you by:

- **rolling chicken in bread crumbs.** Let each child coat their piece of chicken with breadcrumbs and place it on the baking sheet.
- **cleaning up the mess.** Let the children help you clean up afterwards. They can help with the dishes and wipe the table with a sponge. Ask them to count the number of forks, plates, and cups as they clear the table.

ANOTHER OVEN FRIED CHICKEN

(Serves 4 - 5.)

frying chicken cut in parts and skinned	1
Parmesan cheese	1/2 cup
raw wheat germ	1/2 cup
salt	1/2 teaspoon
pepper	1/8 teaspoon
minced onion	1/4 teaspoon
garlic powder	1/4 teaspoon
rosemary	1/4 teaspoon
buttermilk (Plain yogurt, thinned slightly with milk, can be substituted for the buttermilk.)	1/2 cup

Wipe chicken with damp cloth and then dry well. Mix together cheese, wheat germ, seasonings, and onion. Dip each chicken piece in buttermilk and roll in dry mixture. Place on baking sheet coated with nonstick vegetable oil spray and bake at 325 for at least an hour or until chicken meat is no longer pink near the joint.
(Source: Sharing in the Kitchen, Susan Cadwallader.)

CACFP meal component credit:
meat

Children can help by:

- **measuring ingredients.** There are several ingredients to measure in this recipe. Show the children the difference between 1 teaspoon, 1/2 teaspoon, 1/4 teaspoon, and 1/8 teaspoon. Which holds the most? Which holds the least?

- **mixing ingredients.** Before children mix the parmesan cheese, onion, garlic, and rosemary, have them close their eyes and see if they can identify each ingredient by its odor. Let them stir these ingredients together to mix them well.

OVEN FRIED CHICKEN NUGGETS

(Makes 12 pieces.)

2 eggs, beaten, or 1 egg and 2 tablespoon water, beaten together

cornflakes, crushed lightly with your hands	1 cup
all-purpose flour	1/3 cup
boneless and skinless chicken breast (about 6 ounces), cut into 1- to 2-inch chunks	1 (pieces add up to about 3/4 cup)

Preheat the oven to 400 F. Coat a baking pan or cake pan with nonstick vegetable oil spray. Place the beaten egg in a bowl and the crushed cornflakes in a separate bowl. Put the flour in a plastic or paper bag and add the chicken; close the bag and shake to coat the chicken with flour. Pour the chicken chunks into a mesh strainer and shake off all the excess flour over a wastebasket or a sink. One by one, dip each flour-coated chicken chunk into the egg, then into the cornflakes, making sure it is thoroughly coated with each substance. As they are coated, put the chicken chunks into the baking pan.

Bake for 10 to 12 minutes, or until cooked through.

(Source: Jenifer Lang Cooks for Kids, Jenifer Lang.)

CACFP meal component credit:
meat

Children can help by:

- **beating the eggs.** If you use a wisk to beat eggs, even a two year old can help. The old fashioned egg beater with the handle that turns is a little more difficult to use. Four year olds could use the old fashioned egg beater. Put the egg in a bowl with high sides so it doesn't splash out.

- **crushing cornflakes.** There are several ways that the children can crush cornflakes. Encourage them to be gentle, not too rough. Do they understand what it means to be gentle? Can they name other times when they need to be gentle? Try placing some cornflakes in a bag, placing the bag on a flat surface, and letting the children pat the bag softly.

- **shaking the bag to coat the chicken.** Place some chicken nuggets in the bag and let a child shake the bag to coat the chicken. Do this for each child. Use this exercise to help children understand the concepts of before and after.

Other things you can do with chicken and turkey:

If your children are chicken-lovers, they will probably also be turkey-lovers. Try these recipes for dishes made with turkey or chicken.

JUICY ORANGE CHICKEN

(Serves 4-6.)

chicken thighs (skinned)	4
carrots, peeled and sliced into 1/4 inch rounds	4 medium
orange juice	1 cup
reduced-sodium soy sauce	2 tablespoons

Place the chicken thighs in a skillet or pan just large enough to hold them comfortably without crowding. Sprinkle in the sliced carrots. Pour in the orange juice and soy sauce and shake the pan a few times to distribute the liquid. Bring to a boil over high heat, then lower the heat to medium-low and simmer, covered, for 20 minutes. Remove the lid and raise the heat to high; cook for 7 minutes, shaking the pan a few times to move the chicken and vegetables and prevent sticking. The sauce should be thick and syrupy. Serve when cool enough to eat.
(Source: Jenifer Lang Cooks For Kids, Jenifer Lang.)

Child and Adult Care Food Program meal component credit:
meat and 1 vegetable

Children can help by:

- **peeling carrots.** Some 4 year olds may be able to peel carrots with a potato peeler. You will need to supervise them closely. Be sure to teach them how to use the potato peeler safely.
- **sprinkling in the sliced carrots and adding the soy sauce and orange juice.** Let the children arrange the carrots around the chicken and add the orange juice and soy sauce. Because the sauce in this recipe thickens so much through cooking, it offers a good opportunity to demonstrate to the children the difference between a thick liquid and a thin liquid. Let each child stir the sauce to see how thin it is before cooking and stir again later to see how thick it becomes after cooking.

CHICKEN CACCIATORE

(Makes 4 servings, 1 breast half each.)

Onion, chopped	1/2 cup
Boiling water	1/4 cup
Tomatoes	8-ounce can
Tomato puree	1/2 cup (4 oz. can)
Garlic clove	1
Oregano leaves	1 teaspoon
Celery seed	1/2 teaspoon
Pepper	1/8 teaspoon
Chicken breast halves, without skin	4

Cook onion in boiling water until tender. Do not drain. Add tomatoes, tomato puree, garlic, oregano, celery seed, and pepper to onions. Simmer 10 minutes to blend flavors. Place breast halves in heavy frying pan. Pour tomato mixture over chicken. Cook, covered, over low heat until chicken is tender, about 60 minutes. Remove garlic clove before serving. (Source: Dietary Guidelines for Americans, U.S. Dept. of Agriculture.)

CACFP meal component credit:
meat and 1 vegetable

Children can help by:

- **measuring ingredients.** There are several ingredients that children can help measure, including spices, onion and tomato puree. Keep them safely away from the boiling water. The two year olds will have better luck measuring ingredients using a measuring cup. Be sure they are pouring from a small container with a handle. Four years olds usually have enough dexterity to use teaspoons and tablespoons for measuring.

- **adding ingredients.** Let the children add the canned tomatoes and the tomato paste. Use this opportunity to talk with children about the different forms a food can take. As an example, have them compare the texture and thickness of canned tomatoes and the tomato puree. Show them a fresh tomato. Talk about other tomato products, for example, tomato juice, ketchup and stewed tomatoes.

TURKEY DIVAN

(Makes 4 servings, about 3/4 cup each.)

Frozen broccoli spears	10-ounce package
Turkey breast, cooked, sliced	8 ounces
Cornstarch`	2 tablespoons
Turkey broth, unsalted	1/2 cup
Skim milk	1/2 cup
Natural Cheddar cheese, shredded	1/3 cup
Salt	1/4 teaspoon

Cook broccoli as directed on package until just tender. Drain. Arrange broccoli in 1-1/2-quart casserole. Lay turkey slices on top of broccoli. Mix cornstarch with broth in saucepan until smooth. Add milk. Cook, stirring constantly, until thickened. Remove from heat. Add cheese and salt. Stir until cheese melts. Pour sauce over turkey. Bake at 375 degrees F (moderate oven) until sauce is bubbly, about 25 minutes.
(Source: Dietary Guidelines for Americans, U.S. Dept. of Agriculture.)

CACFP meal component credit:
meat and 1 vegetable

Children can help by:

- **grating cheese.** Most 4 year olds can help you grate cheese. Be sure you give them a big piece of cheese to hold on to so that they do not grate their fingers.

- **arranging the broccoli in the casserole pan.** The younger children can help by arranging the broccoli in the casserole pan. If the broccoli is hot, have the children use a fork or tongs.

- **folding the napkins.** Show the children different shapes they can make by folding their napkins. Let each child fold his or her napkin and name the shape.

CHICKEN ITALIANO

(Makes 4 servings, 1 chicken breast half and 3/4 cup spaghetti mixture each.)

Chicken breast halves, skinned, boned	4
Oil	1 teaspoon
Thin spaghetti, broken into fourths	4 oz. (about 1-1/2 cups dry)
Onion, cut in wedges	1 small
Green pepper, cut in strips	1 small
Instant minced garlic	1/8 teaspoon
Oregano leaves	1 teaspoon
Salt	1/8 teaspoon
Pepper	1/8 teaspoon
Bay leaf	1
Tomatoes	16-ounce can
Water	1/4 cup
Parsley, chopped	1 tablespoon

Pound chicken breasts with a metal meat mallet between sheets of plastic wrap until about 1/2-inch thick. Heat oil in frypan. Brown chicken breasts on each side. Add spaghetti, onion, and pepper strips around chicken. Sprinkle with seasonings. Break up large pieces of tomatoes. Pour tomatoes and water over top of chicken. Bring to boiling. Reduce heat, cover, and cook until chicken and spaghetti are done, about 15 minutes. Remove bay leaf. Garnish with parsley.

Variation: **TURKEY ITALIANO**

Use 1 pound raw turkey breast fillets or tenderloins in place of chicken. (Bone and skin are already removed.)

(Source: Shopping for Food and Making Meals in Minutes Using the Dietary Guidelines, U.S. Dept. of Agriculture.)

CACFP meal component credit:
meat and bread

Children can help by:

- **breaking spaghetti.** This recipe calls for spaghetti broken into 4ths. If you can live without perfection, let the children break the spaghetti. For children who can not count to 4, you can make a model. Break spaghetti to the desired length and ask them to copy it. This is also a great activity for children who are learning to count. It is a fun way for them to practice.

- **measuring ingredients.** Measuring is an activity that helps children develop math skills. This recipe provides many opportunities for children to measure. Measuring small amounts, like the 1/8 teaspoon called for in this recipe, is easier for the older children than the younger children.

- **pounding the chicken breast.** The children will enjoy this activity but you will need to closely supervise them.

CHICKEN AND VEGETABLE STIRFRY

(Makes 4 servings, about 3/4 cup each.)

Chicken breast halves	3
Oil	1 teaspoon
Carrots, sliced	1/2 cup
Celery, sliced	1/2 cup
Onion, sliced	1/2 cup
Soy sauce	1 tablespoon
Garlic powder	1/8 teaspoon
Pepper	Dash
Zucchini squash, cut in thin strips	2 cups
Cornstarch	1 tablespoon
Water	1/4 cup

Trim all fat from chicken. Slice chicken into thin strips about 1/8-inch wide and 3 inches long. (Partially frozen meat is easier to slice.) Heat oil in frypan. Add chicken strips and stirfry over high heat, turning pieces constantly, until chicken is no longer red--about 3 to 5 minutes. Reduce heat. Add carrots, celery, onion, and seasonings. Cover and cook until carrots are slightly tender--3 to 4 minutes. Add squash; cook until vegetables are tender-crisp--3 to 4 minutes. Mix cornstarch and water until smooth. Add slowly to chicken mixture, stirring constantly. Cook until thickened and vegetables are coated with a thin glaze.
(Source: Preparing Foods and Planning Menus Using the Dietary Guidelines, U.S. Dept. of Agriculture.)

CACFP meal component credit:
meat and 1 vegetable

Children can help you by:

- **washing vegetables.** The children can help you by washing the carrots, celery, and zucchini. Let them use a soft brush. Talk to them about the different ways they have eaten these vegetables.

- **mixing the cornstarch and water.** This is a good mixing activity for children. They can see the lumps disappear as they stir. Talk with them about smooth things and bumpy, lumpy or rough things.

CHICKEN-CABBAGE STIRFRY

(Makes 4 servings, about 1 cup each.)

Chicken breast halves, skinned and boned	3
Oil	1 teaspoon
Green cabbage, cut in 1/2-inch slices	3 cups
Cornstarch	1 tablespoon
Salt	1/2 teaspoon
Garlic powder	1/4 teaspoon
Water	1/2 cup
Soy sauce	1 tablespoon

Cut chicken breast halves into strips. Heat oil in frypan. Add chicken strips and stirfry over moderately high heat, turning pieces constantly, until lightly browned, about 2 to 3 minutes. Add cabbage; stirfry 2 minutes until cabbage is tender-crisp. Mix cornstarch and seasonings; add to water and soy sauce, mixing until smooth. Stir into chicken mixture. Cook until thickened and pieces are coated, about 1 minute. Serve over vermicelli or other thin pasta.

Variation: BEEF-CABBAGE STIRFRY

Per serving (3/4 cup):

Use 3/4 pound boneless beef round steak in place of chicken. Trim fat from steak. Slice steak across the grain into thin strips, about 1/8 inch wide and 3-1/2 inches long. (It is easier to slice meat thinly if it is partially frozen.)

(Source: Shopping for Food and Making Meals in Minutes Using the Dietary Guidelines, U.S. Dept. of Agriculture.)

CACFP meal component credit:
meat and 1 vegetable

Children can help by:

- **measuring ingredients.** Children can measure the 3 cups of green cabbage. Let them use their hands but make sure their hands are clean. If you would like you can also let them wear sandwich bags on their hands for gloves.

- **mixing the cornstarch and seasonings with the water and soy sauce.** They will need to stir for a while so that all of the lumps disappear. Give everyone a chance to stir.

CHICKEN ENCHILADA BAKE

corn tortillas, steamed till soft	2 dozen
chicken thighs cooked and chopped	6
green onions, chopped	2 bunches
sour cream	1 1/2 cup
green chilies	small can
cream of chicken soup	1 can (14 ounces)
shredded cheese	3-4 cups

Preheat oven to 350 degrees. Mix onions, sour cream, chilies, and cream of chicken soup. Layer alternatively in a casserole dish the following: tortillas, chicken, onion mixture, cheese. Repeat and top with cheese. Bake 30-35 minutes till bubbly.
(Source: Tucson Association for Child Care.)

CACFP meal component credit:
meat and bread

Children can help by:

- **counting the corn tortillas.** This recipe calls for 2 dozen corn tortillas. How many can the children count ? Let them put the tortillas in stacks of 3 or 4 each.

- **layering ingredients.** In making this recipe 4 ingredients are layered in the casserole dish. Let the children watch and try to figure out which ingredient comes next. Use this opportunity to teach them about top, middle, and bottom, first and second.

TURKEY LOAF

(Serves 4-5.)

ground turkey	1 pound
finely-chopped onion	1/2 cup
finely chopped celery	1/3 cup
minced parsley	2 tablespoons
oil	1/4 cup
rich chicken broth	1/4 cup
egg, lightly beaten	1
catsup	2 tablespoons
salt	1/2 teaspoon
poultry seasoning	1 teaspoon
soft bread, crumbled	3 pieces

Put turkey in a large mixing bowl. Saute onion, celery and parsley in oil until limp and add to turkey. Meanwhile, mix together broth, egg, catsup, and seasoning and add to bread. Combine all ingredients with heavy fork and shape into loaf. Bake at 350 degrees for one hour.
(Source: Sharing in the Kitchen, Susan Cadwallader.)

CACFP meal component credit:
meat

Children can help by:

- **measuring ingredients.** Chopped onion and celery are good foods for the younger children to measure. The older children (4 years old and above) can measure the ketchup and salt. Older children have an easier time pouring liquids and manipulating smaller utensils like measuring spoons.

- **mixing ingredients.** This recipe requires a lot of mixing. Give each child a chance to stir.

- **crumbling the bread.** Crumbling bread is an activity suitable for all of the children.

- **shaping ingredients.** All of the children can help mold the ingredients into a loaf shape. Ask them to name other things that are that shape.

TURKEY AND VEGGIE CHILI

(Makes about 1 quart.)

onion, diced	1 cup
ground turkey or chicken	1 pound
vegetable oil	2 tablespoons
tomato sauce or puree	1 (8-ounce) can
red or green bell pepper, diced	1
chicken broth	1 cup
chili powder (see Hint)	2 tablespoons
salt	1 1/2 teaspoons
carrots, peeled and diced	1 large or 2 small
ground cumin	1/2 teaspoon

In a medium saucepan, saute the onion in the oil over medium heat for 8 minutes, stirring occasionally, until translucent. Add the pepper and carrot and saute for 2 minutes. Add the turkey or chicken and saute for 4 minutes, stirring occasionally, until the meat loses its pink color. Add the tomato sauce or puree, broth, chili powder, salt, and cumin, and bring to a boil, stirring; reduce heat so the chili simmers slowly, cover, and cook for 30 minutes, stirring occasionally. Serve when cool enough to eat.

Hint: There are 2 kinds of chili powder sold in jars in the supermarket -- "hot" and plain chili powder. If you are making this for children, be sure to buy the milder powder.

If you have extra time and energy, you can prepare some toppings to serve at the table, such as grated cheddar or Monterey Jack cheese, minced scallions, diced avocado, minced cilantro (Chinese parsley), and sour cream (or yogurt).

(Source: Jenifer Lang Cooks For Kids, Jenifer Lang.)

CACFP meal component credit:
meat and 1 vegetable

Children can help by:

- **measuring ingredients.** Children can help you measure ingredients, but keep them safely away from the chili powder. It could burn if it gets in their nose or eyes.
- **peeling carrots.** Let the older children help you peel the carrots. Teach them how to safely use the vegetable peeler and supervise them closely.

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CHICKEN AND VEGETABLE TURNOVER

(Serves 2-3.)

butter or margarine	2 tablespoons
finely-chopped onions	1/2 cup
thinly-sliced carrots	1/2 cup
chicken breast	1
fresh or frozen peas	1/2 cup
flour	2 tablespoons
salt	1/2 teaspoon
nutmeg	1/4 teaspoon
chicken broth	2/3 cup
9-inch pie shell, thawed if frozen	1
oil	1 teaspoon

Melt margarine in frying pan and add onions and carrots. Saute and stir for 4 or 5 minutes. Meanwhile, skin and bone chicken breast and cut into 1/2 inch pieces. Add to vegetables, along with peas, and cook for 3 to 4 minutes more. Sprinkle in flour and seasonings and add chicken broth. Stir until thickened . Remove pan from heat and allow to cool. Lay thawed pie crust flat on pizza pan or cookie sheet sprayed with a vegetables oil spray. Heap ingredients onto 1/2 of the pie shell leaving a 1 inch edge all around. Slightly wet edges of the pie shell. Fold over remaining half of the pie shell and crimp the edges with a fork. With a sharp knife cut 2 or 3 slits in the top crust and brush with oil. Bake at 350 degrees for 20 minutes.
(Source: Sharing in the Kitchen, Susan Cadwallader.)

CACFP meal component credit:
meat and 1 vegetable

Children can help by:

- **measuring ingredients.** There are several ingredients to measure in this recipe. The carrots and peas are easy for younger children; the flour, salt and nutmeg are better for the older children to measure.

- **sprinkling flour and seasonings.** The children can sprinkle flour and seasonings but it may be difficult for them to do so evenly. They will have more control if you let them use their clean hands.

- **crimping the edges.** Children can use their fingers, a fork or a spoon handle to press the edges of the top and bottom crust together.

CHICKEN POT PIE

(Serves 8.)

Onion, diced	1/3 cup
Celery, sliced	1/3 cup
Margarine	1/4 cup
Flour	1/4 cup
Thyme	1/4 tsp.
Salt and pepper	To taste
Chicken broth	1/1/3 cups
Milk, fluid	2/3 cup
Chicken, cooked, diced	2-2/3 cups
Peas, fresh or frozen	2/3 cup
Carrots, sliced	2/3 cup
Pie crust, top and bottom	2

Saute onions and celery in margarine until tender. Stir in flour and seasoning; cook 5 minutes. Gradually stir in the chicken broth and milk. Continue to stir until mixture thickens. Stir in chicken, peas and carrots; mix well. Pour into bottom pie crust. Cover filling with top crust; seal edges. Prick the top with a fork. Bake at 350 degrees for 30-40 minutes or until the crust is golden.

(Source: Child Care Cooks: Simple Southwest Nutritious and Super Delicious Recipes, Child Care Food Program, Nutrition Bureau, Public Health Division, Dept. of Health, Sante Fe, New Mexico.)

CACFP meal component credit:
meat and 1 vegetable

Children can help by:

- **stirring ingredients.** Talk to them about the difference between thick and thin. Show them how the liquid thickens as it cooks.

- **adding ingredients.** Let the children add the carrots and peas. Talk about other ways you have eaten peas and carrots. What fruits or other vegetables are the color of peas? What fruits or other vegetables are the color of carrots?

TURKEY CHOWDER

(Serves 4.)

onion, finely chopped	1 medium
butter or margarine	3 tablespoons
cooked, leftover turkey or ground turkey, cooked and drained	3 cups
sweet corn, undrained	1 can (12 ounces)
tomatoes	1 can (16 ounces)
salt	1 teaspoon
pepper	1/2 teaspoon
water	2 cups
evaporated milk	1 can (5.33 ounces)

In heavy soup pot, saute onion in butter or margarine until limp. Then add all ingredients except evaporated milk. Simmer, covered, for 20 minutes, then remove from heat. Stir in milk and serve.
(Source: Sharing in the Kitchen, Susan Cadwallader.)

CACFP meal component credit:
meat and 1 vegetable

Children can help by:

- **adding ingredients**. Let the children add the corn and tomatoes. Ask them about other ways they have eaten corn and tomatoes.
- **stirring in the milk.** Let the children stir as you add the milk. Ask them to describe what happen to the liquid as the milk is added. Does the color change? Does the thickness change?

More Fun: Making a Commercial

Children become consumers at a very early age. They may not be able to go and purchase a product for themselves, but they can often times talk an adult into doing it for them. As a result, many companies target their commercials to children, especially during those times when they know many children are watching.

This activity is a good first step at helping children understand what they see on T.V. and become wise consumers. Making commercials is also a fun way for children to learn about food and nutrition. Children enjoy dramatic play. It allows them to use their imaginations and to learn in an active way, the way most children naturally learn. Making commercials helps children develop social skills and language skills and allows them to burn up some energy. This activity is best for children 4 years old and up. However, there are usually ways younger children can participate. Use these suggestions as a starting point and let the game change to suit your children.

There are many different ways children can play at making commercials. They can make commercials as a team, a couple, or individually. They can advertise a favorite food or a new food they have just learned about or eaten. They might want to advertise a special meal, perhaps what they want as their birthday meal, or what their family has on holidays. They may want to make a commercial for a favorite way of preparing a food. For example, one child might talk about why mashed potatoes are best, another why she prefers baked potatoes, and still another child might make a commercial for French fried potatoes.

Materials:

- **old clothes for dress-up.**
  Children love to play dress-up, and discarded clothes are usually pretty easy to get. You may have some old clothes around that the children can use. If not, you can usually pick up these items at garage sales. You might also consider asking parents to donate clothing items the children can use for dress-up. (Old Halloween costumes are especially prized.)

- **props:**
  It is impossible to say what props children might want to use for their commercials. The best idea may be to provide them with a variety of toys and other objects and let their imaginations go to work. If you do not have any food related toys and cooking utensils in your toy collection, you might want to add a few.

Making the commercial.

The way you proceed with this activity will depend in part on the ages of your children and how well they understand what you mean by "making a commercial." You may want to start by talking about commercials and helping them to recall commercials they have seen on T.V. You might also demonstrate the activity by acting out a commercial yourself or by helping them make the first one. One way to start the game is to choose a food that everyone seems to like and let everyone take a turn at making a commercial for it. Another way to start is by asking everyone to pick their favorite fruit or vegetable and make a commercial explaining why they like it and why others might also like it. Encourage them to "set the stage" and "dress the part." Once they catch on to the game it can keep them happy and busy for quite a while.

Sandwiches:

Sandwiches are popular items on provider menus. They are easy to prepare and are especially good to serve on busy days when there is little time to cook. Most of us automatically think about some kind of luncheon meat when we think of sandwiches. For some of us it's bologna, for others of us it's corned beef. Unfortunately, most luncheon meats are high in fat and sodium. More and more we are seeing low-fat, low-sodium luncheon meats in grocery stores, like some brands of turkey ham and turkey bologna. Still you have to be cautious and read the labels carefully. Not all of the luncheon meats that claim to be "Low Fat, Low Sodium" are as low as they would have you believe.

You can also make sandwiches without using luncheon meats at all. Try the following recipes as an alternative to luncheon meats, or just to add variety to your menus.

CHICKEN SALAD SANDWICH

(Makes 4 servings, 1 sandwich each.)

Salad dressing, mayonnaise-type	2 tablespoons
Onion powder	1/8 teaspoon
Dried tarragon, crushed	1/8 teaspoon
Garlic powder	Dash
Chicken, without skin, cooked, chopped	1 cup
Celery, chopped	1/2 cup
Whole-wheat bread	8 slices
Lettuce leaves	4

Mix salad dressing and seasonings in bowl. Stir in chicken and celery. Mix well. Spread about 1/3 cup of the filling on each of four bread slices.

Variation: BEEF SALAD SANDWICH

Use cup chopped, cooked lean beef in place of chicken.

(Source: Making Bag Lunches, Snacks and Desserts Using the Dietary Guidelines, U.S. Dept. of Agriculture.)

CACFP meal component credits:
meat and bread

Children can help by:

- **mixing the salad dressing and seasonings in a bowl.** Let them smell the onion powder, tarragon, and garlic before mixing. Do they recognize any of the odors? Can they name the seasonings?

- **spreading the chicken salad on the bread.** Let the children make their own sandwiches. Give them a spoon for spreading the chicken salad.

You can also add variety to your sandwiches by using different kinds of bread. Pita bread is a favorite among children, perhaps because pita pockets are so easy for children to handle. There are several different kinds of pita bread on the market. Many grocery stores offer sesame pita, whole-wheat pita, and onion pita. Try these different pita breads with the following stuffings and spreads.

BEEF'N'SLAW IN POCKET

(Makes 4 servings, 1 sandwich each.)

Lean beef, cooked, cut in thin strips	1 cup
Coleslaw	1 cup
Tomato, sliced	1 medium (8 slices)
Whole-wheat pita bread	2 (6-inch loaves)

Drain coleslaw. Toss coleslaw with beef strips in a bowl. Cut pita bread in halves. Place one-fourth of filling in each bread half. Top with tomato slices.

(Source: Making Bag Lunches, Snacks, and Deserts Using the Dietary Guidelines, U.S. Dept. of Agriculture.)

CACFP meal component credit
meat and bread

Children can help by:

- **tossing the beef strips and cole slaw in a bowl.** Put the beef and coleslaw in a large bowl with high sides. The large bowl will make it easier for children to toss without tossing food out of the bowl.
- **cutting the pita bread in half.** Older children can cut the pita bread with a plastic knife. Teach them how to use the knife safely and supervise them closely. Use this activity to discuss circles and half circles. What other objects in the room are shaped like circles? Can you name other shapes? Have you ever been in a circle?

PITA BREAD BEAN SPREADS:

You can also make nutritious sandwiches using spreads made from different kinds of beans. The three spreads that follow are great for pita sandwiches or open-faced sandwiches. They can also be used as spreads for crackers or as dips for vegetables like celery, carrots, bell peppers, and cucumbers.

1. CHICK PEA HEAVEN

(Makes stuffing for 4 pita pockets.)

chick peas, drained and rinsed	1 can (16 ounces)
light mayonnaise	2 tablespoons
tomato, diced	1 small
garlic, crushed	1 clove
lemon juice	2 teaspoons
cayenne pepper	1/8 - 1/2 teaspoon
ground cumin	1/4 - 1 teaspoon
turmeric	1/8 - 1/4 teaspoon
chopped fresh parsley	2 teaspoons

2. BLACK BEAUTY SPREAD

(Makes stuffing for 3 pita pockets.)

black beans, drained and rinsed	1 can (15 ounce)
plain nonfat yogurt	2 teaspoons
clove garlic, crushed	1/2 - 1 clove
chili powder	1 teaspoon

3. PIZZAZZY PINTO SPREAD

(Makes stuffing for 4 pita pockets.)

pinto beans, drained and rinsed	1 can (15 ounces)
mild salsa	1/4 cup
green pepper, diced	1/4 cup
green onions, chopped	2 tablespoons
garlic, crushed	1 clove
lemon juice	1 teaspoon

Place the rinsed beans in a bowl and mash to a pulp with a fork. Add the rest of the ingredients and mix to make a uniform spread. Serve on whole wheat bread or in a pita pocket. Add sliced tomato, onion, and cucumber. (Source: Nutrition Action Health Letter, Sept. 1992, Vol. 19 Number 7.)

CACFP meal component credit:
meat and bread

Children can help by:

- **rinsing the beans.** This is a good opportunity to introduce the children to a colander if you have not used one in any previous activity. Talk about what a colander is used for and how it works. Have they seen you use the colander in preparing any other foods?

- **mashing beans.** Put the beans in a plastic bowl with high sides and let the children mash them with a big spoon or other utensil that is not sharp. Give everyone a chance to participate.

Try these additional fillings for pita pockets. NOTE: Some Child and Adult Care Food Program sponsors allow 3 components from a combination dish depending on the quantity of each component. Other food program sponsors allow only two. If you are not sure how to credit pita pocket sandwiches made with the following fillings, check with your individual sponsor. (Source: Making Bag Lunches, Snacks & Desserts, Using the Dietary Guidelines, U.S. Dept. of Agriculture.)

1. **Flaked cooked fish or water packed tuna** mixed with:
- a thickened herb-seasoned tomato sauce (omit salt for canned tuna)
- mandarin oranges, bean sprouts, alfalfa sprouts, or shredded cabbage, and a little mayonnaise-type salad dressing.
- chopped cooked or raw vegetables and plain nonfat yogurt or a little mayonnaise-type salad dressing.

2. **Chopped cooked lean meat or poultry** mixed with -
- shredded cabbage, minced onion, and plain nonfat yogurt. Season with dry mustard and a little cayenne pepper.
- chopped raw vegetables seasoned with chili powder and dry mustard. Add lowfat cottage cheese to moisten.
- raw shredded or sliced vegetables seasoned with a little french dressing.

3. **Mashed cooked dry beans flavored with:**
- a thickened creole sauce made of tomatoes, onions, celery, and green peppers.
- chopped onion and parsley, garlic powder rosemary, thyme, and pepper.
- chopped cooked lean pork, celery, onions, and plain lowfat or nonfat yogurt.

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4. Lowfat cottage cheese mixed with:

- chopped, drained, unsweetened canned fruits, such as apricots, peaches, and pineapple.
- chopped or shredded fresh fruits or vegetables, such as apple, pear, cabbage, celery, carrot, and zucchini.
- alfalfa sprouts, sliced cucumber, shredded carrot, chopped green onion, and shredded cheese, lightly moistened with Italian dressing.

BURRITOS

Burritos are another food that children can pick up and eat with their hands. The recipe below is for bean burritos. However, burritos can also be made with ground beef or turkey, cheese, strips of grilled chicken and the Pita Bread Bean Spreads on the page 57. Use your imagination. Most of the suggestions for pita fillings would also be good rolled in a tortilla. Remember: You are making burritos for little hands. Make them small and easy to handle.

BEAN BURRITOS

cooked Pinto Beans	4 cups
garlic powder	1 teaspoon
salt	to taste
tortillas (6 inch)	4
green onion, finely chopped	1 cup
Monterey Jack cheese, shredded	4 ounces
coarsely chopped Romaine lettuce,	2 cups
chopped tomatoes	2 cups
salsa	1 cup

Mash the beans and season with salt and garlic powder. Heat mixture thoroughly. Wrap tortillas in aluminum-foil; place in a 350 degrees oven for 5 minutes. Spoon the hot bean mixture down the center of each warm tortilla. Top with green onions and cheese. Roll tortillas and place, seam side down, in a 10 x 6 inch baking dish. Bake at 350 degrees for 15 minutes or until cheese is melted. Nest the chopped lettuce and tomato around the warm burritos. Serve with salsa. (All stuffing should be served whether it fits in the tortilla or not.)
(Source: Child Care Cooks: Simple Southwest Nutritious and Super Delicious Recipes, Child and Adult Care Food Program, Nutrition Bureau, Public Health Division, Dept. of Health, Sante Fe, New Mexico.)

CACFP meal component credit:
meat , bread and 1 vegetable

Children can help by:

- **spreading the bean mixture down the center of the tortilla.** Caution them that the filling is hot, give them a spoon that is easy for them to handle and supervise them closely. Do they know how to find the middle or center of the tortilla?

- **making the nest of lettuce and tomato around the burrito.** Let the children build a nest for the burrito. You may want to let them build the nest on their plate before you serve the burrito. Ask them to tell you what they know about other kinds of nests.

PASTA

Pasta is a good source of complex carbohydrates. Complex carbohydrates give children energy.

In reviewing provider menus we noticed that there are two very popular pasta dishes. These are macaroni and cheese and spaghetti with meat sauce. Yet there are a variety of different pastas and a variety of ways to serve them. This section gives recipes for those 2 popular pasta dishes, plus recipes for other pasta dishes that we encourage you to try. There is also a recipe for spaghetti squash. Try using spaghetti squash instead of spaghetti noodles with your favorite spaghetti sauce.

We also encourage you to be creative with your own pasta or pasta sauce recipes. For example, try experimenting with your spaghetti sauce by adding vegetables like zucchini. Try using a favorite pasta dish as a way to introduce children to vegetables that are new to them. Sometimes children are more willing to try a new food when it is served as a part of a favorite or familiar dish.

BAKED SPAGHETTI SQUASH

Take an average-sized spaghetti squash (3 to 4 pounds), pierce the skin in 3 or 4 spots and place in preheated 350 degrees oven. It's best to leave it in for about 1-1/2 hours. (The outside begins to soften as it nears its cooking completion.) When it has cooked, slice it in half and remove center seeds as with any baked squash. The meat will turn to strands during the cooking and you can scoop them out with a fork. They are mild-tasting and delicious with butter and herbs, and/or Parmesan cheese, or a tomato-herb sauce, or a creamy cheese sauce.
(Source: Sharing in the Kitchen, Susan Cadwallader.)

CACFP meal component credit:
1 vegetable

Children can help by:

- **removing the seeds and scooping out the strands of spaghetti squash.** Children will be amazed when you cut the squash and show them the spaghetti. They will want to help you scoop up the strands, but make sure you first let the squash cool. Let the children use a big spoon with a long handle for scooping. Make sure they have washed their hands.

MEAT SAUCE (for Spaghetti)

(Makes 4 servings, about 2/3 cup each.)

Ground beef, lean	1/2 pound
Onion, chopped	1/3 cup
Green pepper, chopped	1/3 cup
No-salt-added tomato puree	1/2 of a 29-oz. can (about 1-3/4 cups)
Dried oregano leaves	1 tsp.
Dried basil leaves	1/4 tsp.
Garlic powder (see NOTES)	1/4 tsp.
Salt	1/2 tsp.
Bay leaves	1

Cook beef, onion, and green pepper in a saucepan until beef is lightly browned. Drain fat. Mix in remaining ingredients. Heat to boiling. Reduce heat, cover, and cook slowly until flavors are blended--about 30 minutes. Stir as needed. Remove bay leaf. Serve over cooked pasta.

NOTE: 2 cloves of minced fresh garlic can be used in place of garlic powder.

(Source: Preparing Foods and Planing Menus Using the Dietary Guidelines, U.S. Dept. of Agriculture.)

CACFP meal component credit:
meat

Children can help by:

- **measuring and adding ingredients.** Let the children spoon or rake the onions and peppers into the measuring cup. Show them the mark on the measuring cup that represents 1/3 cup and let them fill the cup until the onions or peppers reach that mark. Let all of the children smell the spices used in this recipe. See if they can identify any of them by their odor.

EGGPLANT SPAGHETTI SAUCE

(Serves 5-6.)

onion, coarsely chopped	1 medium
oil	6 tablespoons
eggplant, cut in 1/2 inch pieces	1 medium
tomatoes	1 can (14.5 ounces)
tomato paste	1 can (6 ounces)
water	2 1/2 cups
pitted black olives, sliced	1 can (2.25 ounces)
garlic, mashed	2 cloves
salt	1 teaspoon
dried oregano	1/2 teaspoon
dried basil	1/2 teaspoon
chopped fresh parsley	2 tablespoons
cinnamon	1/2 teaspoon
honey	1 tablespoon
sliced mushrooms (optional)	1 cup
Grated Parmesan or Romano cheese	

In heavy-bottomed soup pot, soften onion in 2 tablespoons oil. Remove with slotted spoon and set aside. Soften eggplant in remaining oil. Stir frequently, as the eggplant absorbs oil quickly. After 5 to 6 minutes, return onions to pot. Add tomatoes, tomato paste, and water. Reduce to simmer. Add all other ingredients except wine, mushrooms and cheese. Simmer, covered for 2 to 3 hours. Add mushrooms in the last 15 minutes. Serve over spaghetti or rice, topped with grated cheese.
(Source: Sharing in the Kitchen, Susan Cadwallader.)

CACFP meal component credit:
2 vegetables

Children can help by:

- **slicing the mushrooms and olives.** Using a plastic knife children can slice the mushrooms and the olives. Keep the children seated and calm while they are cutting and supervise them closely.

- **measuring ingredients.** This recipe provides many opportunities for children to practice measuring ingredients. It also gives you an opportunity to introduce children to seasonings like garlic, oregano, basil, parsley, and cinnamon. Let the children smell each one, close their eyes, and identify the one you pass under their noses.

MACARONI AND CHEESE SOUFFLE

(Serves 8.)

macaroni, sea shells, cooked	4 cups
eggs, separated	2
milk	1/2 cup
parsley, minced	2 tablespoons
onions, chopped	1/2 cup
cheddar cheese, grated	1 pound
salt and pepper	to taste

Combine macaroni, egg yolks, milk, parsley and onions. Season to taste with salt and pepper. Beat egg whites until peaks are formed. Fold into macaroni mixture. Pour into baking dish sprayed with nonstick vegetable oil spray and sprinkle cheese on top. Bake at 350 degrees for 20-25 minutes or when a knife is inserted in the center and comes out clean. (Source: Child Care Cooks: Simple Southwest Nutritious and Super Delicious Recipes, Child and Adult Care Food Program, Nutrition Bureau, Public Health Division, Dept. of Health, Sante Fe, New Mexico.)

CACFP meal component credit:
bread and meat

Children can help by:

- **grating cheese.** Cut the 1 pound of cheese into pieces so that each child has some to grate. Make sure the pieces are big enough that the children don't grate their fingers. When the piece gets too small for them to safely grate, it is time for you to take over.
- **combining ingredients.** Pour the macaroni, egg yolks, milk, parsley and onion together and let the children stir. Ask them to name and/or count the number of ingredients as you add them? As each ingredient is added, ask them to describe how the mixture is changed. Do the egg yolks change the color of the mixture? What happens when you add the parsley?

MACARONI DELUXE

(Makes 8 servings.)

Macaroni, cooked	4 cups
Green peas, cooked	2 cups
Plain yogurt	1/4 cup
Chili powder	1 tbsp.
Green onion, minced	1/2 cup
Cucumbers, diced	2 cups
Cumin seed, ground	1/4 tsp.
French dressing	1/4 cup

Combine all ingredients except dressing and parsley. Chill. Before serving, stir in dressing and sprinkle with parsley, if desired.
(Source: Child Care Cooks, Child and Adult Care Food Program, Nutrition Bureau, Public Health Division, Dept. of Health, Sante Fe, New Mexico.)

CACFP meal component credit:
bread and 1 vegetable

Children can help by:

- **measuring ingredients.** This is good recipe for introducing young children to measuring. It calls for 6 ingredients that are measured with a measuring cup. Measuring cups are relatively easy for young children to manipulate. Teaspoons and tablespoons require a little more skill.
- **combining ingredients.** If a child is too young to participate in the measuring, perhaps they can help by combining ingredients. Let them be responsible for pouring each ingredient into the bowl as it is measured. Ask them to name the ingredient as they combine it with others. Talk to them about what the concept of combining means.

PASTA PRIMAVERA

(Makes 4 servings, about 3/4 cup each.)

Thin noodles, uncooked	4 ounces (about 2 cups)
Celery, thinly sliced	1/3 cup
Green beans, 1/3-inch pieces	1/3 cup
Carrots, 1/4-inch dices	1/3 cup
Red onion, sliced	1/3 cup
Green pepper, cut in short strips	2 tbsps.
Basil leaves	1/2 tsp.
Salt	1/4 tsp.
Garlic powder	1/8 tsp.
Pepper	Dash
Oil	1 tsp.
Frozen green peas	1/3 cup
Flour	2 tsps.
Margarine	1 tsp.
Skim milk	3/4 cup

Cook noodles according to package directions. Stirfry fresh vegetables and seasonings in oil in frying pan for about 5 minutes, turning pieces constantly. Add frozen peas, cover, reduce heat, and cook for about 2 minutes until vegetables are tender but crisp. Remove vegetables from frying pan; keep warm. Mix flour and margarine in frying pan. Add milk slowly, stirring constantly; cook until thickened. Sauce will be thin. Stir sauce into noodles. Add vegetables and mix gently. Heat to serving temperature.
(Source: Dietary Guidelines for Americans, U.S. Dept. of Agriculture.)

CACFP meal component credit:
bread and 1 vegetable

Children can help by:

- **washing the vegetables.** Children can help by washing the celery, green beans, carrots, and green pepper. Give them a comfortable place to work. Try putting a pan of water on the floor and giving them a clean pan in which to place the vegetables after they are washed. Make sure you do this on a floor that will not be harmed by a little water. After the children have washed the vegetables, let them clean up any water they have splashed or spilled so that no one slips.

LIGHT BEEF STROGANOFF

(Makes 4 servings, 1/2 cup of Stroganoff and 1/2 cup noodles each.)

beef round steak, boneless, trimmed	3/4 pound
fresh mushrooms	1/4 pound
onions, slices	1/2 cup
beef broth, condensed	1/2 cup
water	1/2 cup
catsup	1 tablespoon
pepper	1/8 teaspoon
flour	2 tablespoons
buttermilk	1 cup
noodles, cooked, unsalted	2 cups (about 2 1/2 cups uncooked)

Slice steak across the grain into thin strips, about 1/8 inch wide and 3 inches long. (It is easier to cut thin slices of meat if it is frozen.) Wash and slice mushrooms. Cook beef strips, mushrooms, and onion in nonstick frying pan until beef is lightly browned. Add broth, water, ketchup, and pepper. Cover and simmer until beef is tender, about 45 minutes. Mix flour with about 1/4 cup of the buttermilk until smooth; add remaining buttermilk. Stir into beef mixture. Cook, stirring constantly, until thickened. Serve over noodles.
(Source: Dietary Guidelines for Americans, U.S. Dept. of Agriculture.)

CACFP meal component credit:
meat and bread

Children can help by:

- **slicing mushrooms.** Mushrooms are a soft vegetable that children can easily slice with a plastic knife. Teach them how to use the knife safely and supervise them closely.
- **mixing the flour and buttermilk.** The children may not be able to mix the flour and buttermilk until it is smooth but they will enjoy trying. Let them mix in a bowl with high sides so that there is less splashing. Give everyone a turn. Talk about the difference between smooth and lumpy. Let them have a taste of buttermilk and then a taste of regular milk. How are they different? How are they the same?

PEANUT BUTTER NOODLES

This a version of the sesame noodle dish that is so popular in American Chinese restaurants.

(Makes 2 cups.)

Pasta (see NOTE)	1 cup
Creamy peanut butter	1/4 cup
Chicken broth	1/4 cup
Freeze-dried chives	2 tsps.
Reduced-sodium soy sauce	2 tsps.
Rice vinegar (see NOTE)	2 tsps.
Honey	1 tsp.
Grated fresh ginger	1 tsp.
Sesame seeds	1 tbsp.

Cook the pasta according to the package directions and drain. While the pasta is cooking, combine the peanut butter, broth, chives, soy sauce, rice vinegar, honey, and ginger in the bowl of a food processor or blender. Process until smooth. Pour over the drained noodles and toss well. Sprinkle the sesame seeds over noodles and serve warm, cold, or at room temperature.

NOTE: You can use any kind of pasta for this recipe. Freeze-dried chives and sesame seeds are available in the spice section of the supermarket. Rice vinegar, which has a gentle flavor and is slightly sweet, is available in the supermarket ethnic-foods section.

(Source: Jenifer Lang Cooks for Kids, Jenifer Lang.)

CACFP meal component credit:
bread

Children can help by:

- **pushing the buttons on the food processor or blender.** Children enjoy pushing the buttons and watching the appliance work. Use this opportunity to teach them about the concept of blending. Think of other recipes you have made that have required blending.

- **sprinkling the sesame seeds.** Try putting the sesame seeds on the table and let each child sprinkle over his or her own noodles. Think of foods in which you eat the seeds, like cucumbers , squash and tomatoes, and foods in which you do not eat the seeds, like watermelon and cantaloupe. Why don't we eat watermelon and cantaloupe seeds?

TUNA PASTA SALAD

(Makes 4 servings, about 1 cup each.)

Elbow macaroni, uncooked	3/4 cup
Tuna, water-pack, drained	6-1/2 ounce can
Celery, thinly sliced	1/2 cup
Seedless red grapes, halved	1 cup
Salad dressing, mayonnaise-type, reduced-calorie	2 tablespoons

Cook macaroni according to package directions, omitting salt. Drain. Toss macaroni, tuna, celery, and grapes together. Mix in salad dressing. Serve warm or chill until served.
(Source: Shopping for Food and Making Meals in Minutes Using the Dietary Guidelines, U.S. Dept. of Agriculture.)

CACFP meal component credit:
bread and 1 vegetable or fruit

Children can help by:

- **cutting the grapes in half.** Children can use a plastic knife to cut the grapes in half. Keep them seated while they are cutting and supervise them closely.

- **tossing the macaroni, tuna, celery and grapes together.** Let them do this in a big bowl so nothing spills. Name each ingredient as you add it. As an alternative to mixing the ingredients in a bowl, you can also put all of the ingredients in a large zip lock bag. This allows the children to see the ingredients mix as they turn the bag over and over.

RICE-PASTA PILAF

(Makes 4 servings, about 1/2 cup each.)

Uncooked brown rice	1/3 cup
Chicken broth, unsalted	1-1/2 cups
Thin spaghetti, broken into 1/2-to 1-inch pieces	1/3 cup
Margarine	2 teaspoons
Green onions, chopped	2 tablespoons
Fresh mushrooms, chopped	2 tablespoons
Garlic, minced	1/2 clove
Savory	1/2 teaspoon
Salt	1/4 teaspoon
Pepper	1/8 teaspoon
Slivered almonds, toasted, if desired (See Notes)	1 tablespoon

Cook rice in 1 cup of the broth in a covered saucepan until almost tender, about 35 minutes. Cook spaghetti in margarine over low heat until golden brown, about 2 minutes. Stir frequently; watch carefully. Add browned spaghetti, vegetables, remaining 1/2 cup of chicken broth, and seasonings to rice. Bring to boil, reduce heat, cover, and cook over medium heat until liquid is absorbed--about 10 minutes. Remove from heat; let stand 2 minutes. Garnish with almonds.

Notes: Toast almonds 350 degrees F (moderate) oven until lightly browned, 5 to 12 minutes. Or, toast in heavy pan over medium heat for 10 to 15 minutes, stirring frequently.

(Source: Preparing Foods and Planning Menus Using the Dietary Guidelines, U.S. Dept. of Agriculture.)

CACFP meal component credit:
bread

Children can help by:

- **breaking the spaghetti**. Let them break the spaghetti before you open the package.
- **topping with almonds.** Try letting each child garnish his\her own serving of rice-pasta pilaf.
- **chopping mushrooms.** Mushrooms are soft and can be cut easily with a plastic knife. Supervise the children closely.

PIZZA

Many providers offer pizza almost weekly. It can be a nutritious food but it can also be high in fat. Most of the fat in pizza is in the crust, the cheese, and the meat toppings. There are some easy ways to reduce the fat in pizza. Try vegetable toppings like zucchini, bell pepper, onion, mushrooms, and/or cooked spinach, instead of meat toppings. Try using pita bread for the crust. It is low in fat and simple to use. If you want a thicker crust, try making individual pizzas using whole-wheat English muffins. (See the recipe for Mexican Snack Pizza in the snack section of this chapter for a recipe using English muffins. Mexican Snack Pizza can also be served at times other than snack time.)

PITA PIZZA

(Makes 6 servings, one pizza per serving.)

whole-wheat pita bread (pockets) cut in half horizontally and toasted	3
tomato or pizza sauce	6 tablespoons
mushrooms, sliced	9 tablespoons
onion, diced	3 tablespoons
mozzarella cheese, shredded	8 ounces
oregano leaves	
garlic powder	

Preheat broiler. On baking sheet place toasted pita halves and spread 1 tablespoon tomato sauce over each; top with half of the mushrooms and onions, then sprinkle each with cheese and dash with oregano leaves and garlic powder. Broil until cheese melts, 1 to 2 minutes.
(Source: Weight Watchers Quick Start Plus Program Cookbook, Jean Nidetch.)

CACFP meal component credit:
meat and bread

Children can help by:

- **spreading tomato sauce over pita bread.** Let the children take a tablespoon of tomato sauce and spread it over the pita bread.

- **adding the toppings.** The children can add their own mushrooms and onions and sprinkle the pizza with cheese. Make sure they have clean hands. Consider offering other toppings in addition to the mushrooms and onions. Let the children choose among them to top their pizza.

The following recipe allows you to take advantage of children's love for pizza to introduce them to eggplant. However, this is one pizza they might want to eat with a fork. It can be messy. Experiment with toppings. Try putting a different topping on each eggplant slice and having a tasting party.

EGGPLANT PIZZA

(Serves 4.)

eggplant	1 medium
pizza sauce	1 can (10.5 ounces)
chopped green onions	1 cup
garlic, mashed	3 cloves
oregano	1 teaspoon
pitted black olives, sliced	1 can (2 1/4 ounces)
grated mozzarella or Jack cheese	2 cups

Slice eggplant 1/2 inch thick and place in lightly-greased, shallow, baking dish. Mix together pizza sauce, onions, garlic, and oregano and spoon evenly over eggplant pieces. Top generously with olives and cheese and bake for 20 minutes in 350 degree oven. Serves 4.
(Source: Sharing in the Kitchen, Susan Cadwallader.)

CACFP meal component credit:
meat and 1 vegetable

Children can help by:

- **spooning pizza sauce over the eggplant.** Let the children spread the pizza sauce on the eggplant.
- **adding the toppings.** Provide a variety of toppings and let the children pick from them. Encourage the children to use different toppings on each slice of eggplant.

Fish

It would be difficult to find a provider who did not serve fish sticks. Unfortunately, fish sticks may not be the best way to introduce children to fish. Many children have never tasted fish served without the heavy breading. After they have added lots of ketchup, it is likely that the breading and ketchup are all they can taste. What follows are a few recipes for fish dishes children may like. The first recipe would make a good alternative to heavily breaded fish sticks. Try these recipes with your children. Give them the experience of tasting what fish really taste like.

OVEN FRIED FISH

(Serves 4.)

fish (suggested: turbot, flounder, snapper, cod)	4 pieces
oregano	1/2 teaspoon
salt	1/2 teaspoon
oil	4 tablespoons
corn meal	1 cup
raw wheat germ	1/4 cup
grated Parmesan cheese	3 tablespoons
garlic powder	1/2 teaspoon
onion powder	1/2 teaspoon

Tartar Sauce:

mayonnaise	1/4 cup
yogurt	1/4 cup
minced onion	1 tablespoon
sweet pickle, diced (or 1 tablespoon relish)	1 small
prepared horseradish	1 teaspoon

Rub frozen (Do Not Thaw) fish with oil. Mix together corn meal, wheat germ, cheese, and seasonings. Coat fish well with mixture and place, not touching, in a shallow baking pan. Place fish under medium-heated broiler for 10 to 15 minutes without turning. Fish is done when it is golden brown and flakes easily.

To make Tartar Sauce, mix all ingredients well. Serve with fish.

(Source: Sharing in the Kitchen, Susan Cadwallader.)

CACFP meal component credit:
meat

Children can help by:

- **mixing the corn meal, wheat germ, cheese and seasonings.** Let the children stir these ingredients together. Talk with them about the concept of mixing. Can they name other foods you have made that required mixing.

ITALIAN FISH ROLLUPS

(Makes 4 servings, 1 rollup each.)

Flounder fillets, fresh or frozen, without skin	1 pound
frozen french-style green beans	9 ounce package
onion, chopped	2 tablespoons
boiling water	1/2 cup
tomato sauce	8 ounce can
oregano leaves	1/4 teaspoon
basil leaves	1/4 teaspoon
garlic powder	1/8 teaspoon
Grated Parmesan cheese	1 tablespoon

Thaw frozen fish in refrigerator overnight. Divide fish into 4 servings. Add beans and onions to boiling water. Cover and boil gently until beans are tender-crisp, about 7 minutes. Drain. Place 1/4 cup of the bean-onion mixture in middle of each fish portion. Start with the narrow end of the fillet and roll. Place in baking pan with end of fillet underneath. Mix tomato sauce, oregano, basil and garlic powder. Pour over fish rollups. Sprinkle with cheese. Bake at 350 degrees until fish flakes easily when tested with a fork, about 45 minutes.
(Source: Dietary Guidelines for Americans, U.S. Dept. of Agriculture.)

CACFP meal component credit:
meat and 1 vegetable

Children can help by:

- **rolling up the bean-onion mixture in the fish.** Be sure the children have clean hands for this activity. You may also want to let them wear sandwich bags or the plastic bags used for vegetables in grocery stores as gloves.

- **sprinkling the cheese over the fish roll-ups.** Let the children sprinkle on the cheese and have one last look before you put the baking pan in the oven. Call them back to the kitchen when you are ready to test the fish to see if it is done. Show them how the fish flakes when done.

BAKED FISH WITH VEGGIES

(Makes 6 servings.)

fish fillets or steaks, (about 1/2 inch thick), thawed if frozen.	2 pounds
margarine	1/4 cup
mushrooms, sliced	1/4 pound
green pepper, finely chopped	1/2 cup
all-purpose flour	1/4 cup
dash salt	
pepper	1/4 teaspoon
frozen peas or green beans thawed,	1 package (10 ounces)
lemon juice	1 tablespoon
Parmesan cheese, grated	1/4 cup
milk	

Arrange fish in an even layer in a 7 x 11 baking dish. Cover and cook in the microwave oven 3 minutes or until fish flakes easily when probed with a fork. Turn fish over and cook, covered 2 to 3 minutes. Lift fish to a warm serving platter that has a rim. Pour liquid into a 2 cup measuring glass and reserve. Add margarine to baking dish and cook 1 minute to melt. Add mushrooms and green pepper; cook covered, 4 minutes, stirring once. Stir in flour, salt and pepper; cook uncovered until bubbly (about 2 minutes). Add enough milk to fish liquid to make 1 cup total; gradually stir into vegetable mixture and cook, uncovered, 6 minutes or until thickened; stir often. Blend in peas and lemon juice, spoon over fish, and sprinkle with cheese. Return to oven and cook, uncovered, 1 minute, or until heated through.

(Source: Off to a Good Start, Catherine Romaniello and Nancy Van Domelen.)

CACFP meal component credit:
meat and 1 vegetable

Children can help by:

- **arranging fish on the platter.** Make sure the children have clean hands. You might also want them to wear plastic bags or sandwich bags on their hands for gloves. This will prevent their hands from smelling of fish.

- **slicing mushrooms.** The older children can slice mushrooms with a plastic knife. Teach them to use it safely and supervise them closely. Before they slice the mushrooms, you might let children too young to slice separate the mushroom stems from the mushroom tops. This is not something that needs to be done, but the young children will enjoy it.

SALMON LOAF

skinless and boneless salmon (do not drain)	1 can (6.5 ounces)
eggs	2
coarsely chopped celery	1/2 cup
quick-cooking rolled oats	1/2 cup
baking powder	1/4 teaspoon
evaporated milk	1/4 cup
fresh lemon juice	2 teaspoons
salt	3/4 teaspoon
ground pepper	1/4 teaspoon
Tabasco	2 dashes

Pre-heat the oven to 350 degrees. Coat a 9 x 5-inch loaf pan with nonstick baking spray. Put all of the ingredients into a blender or into the bowl of a food processor and puree. Pour into the loaf pan and bake for 30-40 minutes, until firm to the touch and light brown. Serve when cool enough to eat or refrigerate and serve cold.
(Source: Jenifer Lang Cooks For Kids, Jenifer Lang.)

CACFP meal component credit:
meat

Children can help by:

- **pushing the buttons on the blender or food processor.** Children are usually fascinated by blenders and food processors. Talk to them about how the blender or food processor works and explain the concept of blending or mixing. Ask them to identify the ingredients as you add them. What other recipes have you fixed that required using the blender or food processor?

- **monitoring the salmon loaf as it cooks.** Let the children watch as you pour the mixture into the loaf pan and check the loaf later to determine if it is ready. When the loaf is fully cooked, let them watch you remove it from the loaf pan. The change from the mixture you started with to the fully cooked loaf will seem like magic to them.

More Fun: Playing "Go Shop"

(This activity is an adaptation of one described in a publication by Wildwood Child Care Food Program, Inc.... For those who care for children, March, 1991. Englewood, CO.)

Make a deck of food picture cards to use in the game of Go Shop. What you and the children do:

1. You will need 65 cards for this game. This is 13 more than the number that comes in a full deck. Perhaps you have some old, incomplete decks around the house that you can combine so that you have enough cards. If not, you will need to purchase two decks.

2. Cut pictures of food from magazines and seed catalogs. Cut pictures so that only one food group is shown. For example, find a picture of corn all by itself rather than in a combination dish. If the picture does not cover the card completely cut a plain piece of white paper to cover the entire card and then paste or use double sided tape to attach the food picture to the card.

3. To complete the set of cards you'll need 13 pictures each of foods to represent the 5 food groups. Those food groups are:
   bread, cereal, rice and pasta group
   vegetable group
   fruit group
   milk, yogurt and cheese group
   dry beans, eggs, nuts, fish, poultry, and meat group

It may take some time before you and the children have find all of the right pictures to complete your deck. Don't try to complete this project in one day. Make it an ongoing project; perhaps one you save for rainy days when the children can not go outside and play.

When you have the deck of cards completed you will be ready to teach children how to play Go Shop.

Learning the Game:

Step 1
Show children each of the cards to be sure that they can identify the foods that are pictured. When they recognize the food, move to step 2.

Step 2
Play a game by putting the cards into the appropriate food groups. When children know all of the food groupings, move to step 3.

Step 3
Teach children to play Go Shop. The rules are similar to Go Fish.

- Shuffle cards and deal out 7 cards to each player. Put the remaining cards in a stack face down between the players.

- The players arrange their cards and try to make a set with one card of each of the 5 food groups.

- If a player has a set she can put it down. If she does not have a complete set she asks one of the other players if she has a food group card she needs. For example, a player might ask another " Do you have a dairy group?" If that player has this card, she must give it to the person requesting it. If that person does not have a card in that group, she tells the person requesting it to "Go Shop." Then the player who had requested the card must draw a card from the deck in the center. If the card from the deck is a card that completes a set for that player, the player places the set down and takes another turn. If the card does not complete a set, her turn is over. It is the other player's turn.

- Continue playing in this manner untii one player has laid down all of the cards in her hand. The first player to accomplish this is the winner.

Step 4
After children have mastered Go Shop, use the cards to play Concentration.

VEGETABLES:

Justified or not, children have a reputation for disliking vegetables. Some of us consider ourselves lucky if we can find a few vegetables our children will eat. We stick with those vegetables, serving them over and over and over. Yet of all of the food groups, vegetables may be the food group that gives us the most choices. There are a wide variety of vegetables to choose from and countless ways to prepare them.

Don't give up on your children being vegetable lovers. Keep trying. Offer a variety of vegetables and try preparing them a variety of different ways. Some of the tastiest ways to prepare vegetables are also the simplest and most nutritious ways to prepare them. Consider steaming, stir-frying and baking. These cooking methods are explained below.

POPULAR COOKING METHODS THAT CONSERVE NUTRIENTS

STEAMING

Steaming is an excellent way to cook vegetables, especially green leafy vegetables, asparagus, artichokes, broccoli, cauliflower, corn, peas, root vegetables, string beans and any of the summer squashes. Some people purchase a vegetable steamer like the collapsible stainless steel basket that fits in any size pan. In using the basket steamer a small amount of water is placed in a pot. The vegetables are placed in the steamer basket which sits in the pot above the water. The water never touches the vegetables. They are cooked by the steam.

You can also steam vegetables without purchasing a commercial steamer. Simply put small amount of water in a pan and add the vegetables. Cover the pan with a tight fitting lid and keep on low-medium heat until the vegetables have cooked. (Don't let all of the water cook away.) Vegetables should be a little crisp and still brightly colored when they are done. Be careful not to overcook them.

On the following pages there are several recipes for preparing vegetables. However, steaming is one of the tastiest, easiest and quickest ways to prepare them. Let your children try some of the vegetables mentioned above seasoned with a little margarine, lemon juice, and/or herbs.

STIR-FRYING

Stir-frying is another popular cooking method for vegetables. Like steaming, stir-frying leaves vegetables somewhat crisp and still brightly colored. Stir-frying requires a little oil, and therefore adds fat while steaming does not. However, both methods are good ways to cook vegetables while conserving nutrients.

To stir-fry you first add a small amount of oil to the pan. When the oil is hot (the flame on your stove should be quite high) you add the vegetables. To prevent the vegetables from burning, stir them continuously until they are done. If you are cooking several vegetables in one dish, those that take the longest to cook should be added first. Season with garlic, ginger, or other spices. See the recipe for vegetable stir-fry in this section of the recipes.

BAKING

Baking also conserves the nutrients in vegetables. Baking is a good cooking method for winter squashes, onions, tomatoes, leeks, cauliflower, broccoli, eggplants, parsnips, potatoes, and rutabaga. See the recipe for baked cauliflower in this section of recipes.

MASHED POTATO AND CAULIFLOWER

(Serves 3 or 4.)

potato, peeled and chopped	1 large
cauliflower, chopped	1 small head
onion, chopped	1/2 small
milk, warm	1/3 cup
margarine	2 tablespoons
salt and nutmeg to taste	

Steam potatoes above water or in very little water for 5 minutes. Add cauliflower and onion and cook until they are slightly tender. Transfer to blender, add milk and margarine and blend until smooth. Add seasonings to taste. Serve at once or reheat.
(Source: Sharing in the Kitchen, Susan Cadwallader.)

CACFP meal component credit:
1 vegetable

Children can help by:

- **washing the vegetables.** Give the children a place to sit, a dishpan of clean water and a clean pot in which to put the washed vegetables. Let them rinse the cauliflower in the water and then scrub the potatoes using a soft brush. Be sure they clean up any spilled water after they are done. Water on the floor could cause someone to slip.

- **peeling the potatoes.** Some 4 year olds and most children older than 4 can help peel potatoes using a potato peeler. Do not try this activity with children younger than 4. Keep the children seated and calm while they are using the potato peeler. Teach them how to use it safely and supervise them closely.

VEGETABLE STIRFRY

(Makes 4 servings, about 1/2 cup each.)

oil	2 teaspoons
broccoli florets and stems, 1-inch pieces	1 cup
carrots, diagonal slices, 1/8-inch thick	2/3 cup
zucchini, 1/2-inch cubes	2/3 cup
red onion, sliced	2/3 cup
water	1 tablespoon
fresh mushrooms, sliced	1/2 cup
dill weed	1/4 teaspoon
salt	1/4 teaspoon
cherry tomatoes, halved	4

Heat oil in frypan. Add broccoli, carrots, zucchini, and onion. Stirfry over moderate heat about 4 minutes, turning vegetable pieces constantly. Add water, cover, and cook until vegetables are tender-crisp, about 6 minutes. Stir in mushrooms, dill weed, and salt. Place tomato halves on vegetable mixture. Cook and cover just until mushrooms and tomatoes are heated, about 3 minutes.

(Source: Dietary Guidelines for Americans, U.S. Dept. of Agriculture.)

CACFP meal component credit:
2 vegetables

Children can help by:

- **slicing mushrooms.** The older children can slice mushrooms with plastic knife. Be sure you instruct them in using the knife safely and supervise them closely.
- **breaking off the broccoli florets.** Broccoli would be difficult for children to cut with a plastic knife, but they can break off the florets. After they remove the florets you can cut the stems.
- **washing vegetables.** Children can wash the broccoli, carrots, zucchini, mushrooms and tomatoes. Give them a pot of clean water for washing and a clean bowl or other container to put the vegetables in once they are clean. As they wash the vegetables talk to them about how each vegetable grows. Which vegetable grows underground? Which vegetable likes the dark?

BAKED CAULIFLOWER

(Serves 4 to 6.)

cauliflower	1 head
eggs, beaten	2
Parmesan or Romano cheese, grated	2 tablespoons
salt and pepper to taste	

Steam cauliflower for about 15 minutes or until tender. When vegetable is tender, remove it from the steamer and place in a casserole, with a cover just large enough to hold the head. Pour the egg over the top of the cauliflower, add salt and pepper, top with cheese. Bake, covered, at 375 degrees for 10 minutes, or until the cheese is melted and the egg is baked. Serves 4 to 6.
(Source: The Frugal Gourmet, Jeff Smith.)

CACFP meal component credit:
1 vegetable

Children can help by:

- **beating the eggs.** Put the 2 eggs in a plastic bowl with high sides and let each child have a turn at beating them.

- **pouring egg over the top of the cauliflower and topping it with cheese.** This is a very simple dish to make. If the children perform this task they have done most of what the recipe requires. After they pour the egg and top the cauliflower with cheese, put it in the oven for them. Show them how to set the timer and ask them to listen for the oven buzzer to sound. Point out to the children the large role they played in making the baked cauliflower.

VEGETARIAN ENCHILADA CASSEROLE

(Makes 4 pieces, 4 by 4 inches each.)

Filling:	
onion, chopped	1/2 cup
green pepper, chopped	1/2 cup
celery, chopped	1/4 cup
water, boiling	1/4 cup
canned pinto beans, drained	1 1/2 cup
no salt added tomato puree	1/2 cup
corn tortillas	8
Sauce:	
no salt added tomato puree	1 1/2 cup
water	3/4 cup
chili powder	1 tablespoon
ground cumin	1/8 teaspoon
garlic powder	1/8 teaspoon
salt	1/8 teaspoon
Topping:	
Monterey Jack cheese	1/4 cup

Pre-heat oven to 350 degrees. Cook onion, green pepper, and celery in boiling water until tender. Drain liquid if necessary. Add beans, and 1/2 cup of tomato puree. Mix gently. Mix all sauce ingredients together thoroughly. In an 8-by-8-by-2-inch baking pan, place four tortillas, one-half of the filling mixture, and one-fourth of the sauce. Add remaining filling mixture and another one-fourth of the sauce. Cover with four tortillas and remaining sauce. Sprinkle cheese over top. Bake until cheese is melted and sauce is bubbly- about 30 minutes.
(Source: Preparing Foods and Planning Menus Using the Dietary Guidelines, U.S. Dept. of Agriculture.)

CACFP meal component credit:
meat and bread

Children can help by:

- **counting and placing the tortillas.** Children can get 8 tortillas from the package and place 4 of them in the baking pan. After you have added the filling and sauce , they can place the remaining 4 tortillas. You can use this recipe to introduce the children to concepts such as layering, order (first second, third), repeating, beneath, beside, and on top of.
- **measuring ingredients.** There are several ingredients that the children can measure using the measuring cup. Make sure everyone has a chance to participate.

CARROTS WITH CRANBERRIES (OR RED CABBAGE WITH CRANBERRIES)

(Serves 4-6.)

apple	1
cranberries	1 cup
grated carrots	4 cups
light-brown sugar	4 tablespoons
salt	1/2 teaspoon
apple cider	1/2 cup
margarine	2 tablespoons

Grate the apple and wash the cranberries. Combine with the carrots, sugar, salt, and cider. Place in a buttered casserole and dot with butter. Cover and bake in a preheated 350 degree oven for 40 minutes, stirring once.
(For red cabbage with cranberries: Substitute finely shredded red cabbage for the carrots. Increase baking time to 1 hour or until cabbage is tender.)
(Source: The Victory Garden, Marian Morash.)

CACFP meal component credit:
2 fruit/vegetable components

Children can help by:

- **washing cranberries.** To make it fun, put the cranberries in a large pot or dishpan full of water. Let the children swirl them around in the water to wash them and then fish them out of the water and put them in a clean container.

- **grating apples.** Children 4 years old and older can grate the apple. Make sure you give them a big enough piece that they don't grate their fingers.

HERBED VEGETABLE COMBO

(Makes 4 servings, about 3/4 cup each.)

water	2 tablespoons
thinly sliced zucchini	1 cup
yellow squash, thinly sliced	1 1/4 cup
green pepper, cut into 2 inch strips	1/2 cup
celery cut into 2-inch strips	1/4 cup
chopped onion	1/4 cup
Caraway seed	1/2 teaspoon
garlic powder	1/8 teaspoon
tomato cut into 8 wedges	1 medium

Heat water in large frypan. Add squash, green pepper, celery, and onion and cook over moderate heat until vegetables are tender-crisp- about 4 minutes. Sprinkle seasonings over vegetables. Top with tomato wedges. Cover and cook over low heat until tomato wedges are just heated- about 2 minutes.

(Source: Preparing Foods and Planning Menus Using the Dietary Guidelines, U.S. Dept. of Agriculture.)

CACFP meal component credit:
2 vegetables

Children can help by:

- **washing vegetables.** Let the children wash the zucchini, yellow squash, green pepper, celery, and tomato. Can they name all of these vegetables? Use this activity to help children learn to identify colors and shapes.

- **measuring ingredients.** Let the children measure the vegetables using a measuring cup. Can they name each ingredient? Can they name other vegetables?

CORN SALAD

(Serves 4.)

sweet corn, 1 12-ounce can drained or
1 10-ounce package frozen, steamed and cooled.

Swiss cheese, cut into 1/4-inch cubes	1/2 cup
green pepper, chopped	1/4 cup
celery, chopped	1/4 cup
onion, thinly sliced	1/2 small
red cabbage, finely shredded	1 cup
dill pickle, chopped (optional)	1/3 cup

Chill all ingredients and dress with Italian-style dressing or Thousand Island dressing. (Source: Sharing in the Kitchen, Susan Cadwallader.)

CACFP meal component credit:
2 vegetables

Children can help by:

- **cutting Swiss cheese cubes.** Give the children thick slices of cheese and plastic knifes. Show them how to cut the cheese into cubes. Let them make some extra cheese cubes. Store the extra in the refrigerator and serve them in a day or so at snack time.

- **combining and mixing the ingredients.** Let the children pour the ingredients from the measuring cup to a large bowl. Ask them to count the number of ingredients used to make the corn salad. Let them stir the ingredients together and name the different colors they see.

ZUCCANOES (or zucchini boats)

Wash medium sized zucchini squash. Steam for 10 minutes. Cut in half lengthwise and scoop out the centers. Mix zucchini with left-over meat, diced onion and celery, and tomato paste. Stuff the "canoes," top with Parmesan cheese and thyme. Bake 20-30 minutes at 350 degrees. (Source: Off to a Good Start: Practical Nutrition for Children, Catherine Romaniello and Nancy Van Domelen.)

CACFP meal component credit:
meat and vegetable

Children can help by:

- **washing the zucchini.** Let the children wash the zucchini. Do they understand that zucchini is a kind of squash? Do they remember eating any other kind of squash? Can they name the other squash? How was it different ? What color was it?

- **scooping out the centers of the zucchini halves**. If you let the zucchini halves cool, the children can help scoop out the centers. Let them scoop with a spoon. Talk about the seeds they are scooping out. In what other foods have they noticed seeds? Can they name other foods they eat in which they eat the seeds?

- **mixing ingredients.** The children can mix all of the ingredients together. Put the ingredients in a big bowl and give them a spoon with a long handle for stirring. Ask them to name the ingredients. How many ingredients are there?

- **stuffing the zucchini.** Let each child stuff his/her own zucchini. Use this activity to talk about the concepts of empty and full. Ask them to show you their zucchini when it is empty, and after they have stuffed it, when it is full.

SPINACH AND ONION PIE

(Serves 5 or 6.)

spinach, frozen chopped	10 1/2 ounce package
margarine	2 tablespoons
onion, thinly sliced	1 large
egg	1
cottage or ricotta cheese	1 cup
Jack cheese	1 cup grated
salt	1/2 teaspoon
dill weed	1/2 teaspoon
double pie crust, 9-inch	1

Thaw spinach and steam briefly. Melt margarine in frying pan and saute onions until limp. Beat egg with cottage or ricotta cheese and stir in Jack cheese and seasonings. Squeeze all water out of steamed spinach and combine with cheese mixture, and cover with top crust. Crimp edges and slash top. Bake in 350 degree oven for 45 to 50 minutes.
(Source: Sharing in the Kitchen, Susan Cadwallader.)

CACFP meal component credit:
1 vegetable and meat

Children can help by:

- **beating eggs with cottage or ricotta cheese and other ingredients.** Let the children beat the eggs and stir in the other ingredients. Make sure the bowl is big enough that they don't splash food out as they stir. Let them name each ingredient as they add it.

- **crimping the edges of the pie crust.** Children can use a fork, spoon handle, or their fingers to press the edges of the top and bottom crust together. Make sure they have clean hands.

VEGETABLE PIE

(Serves 5 or 6.)

eggplant, peeled and cut into pieces	1 medium
zucchini, cut into pieces	2 medium
onion, chopped	1 large
olive oil	1/4 cup
tomatoes, peeled and chopped	4 medium
eggs	3
Parmesan cheese	3/4 cup
parsley, minced	1 tablespoon
basil	1/2 teaspoon
oregano,	1/2 teaspoon
mozzarella cheese, thinly sliced	1/4 pound
salt and pepper	

Saute eggplant, zucchini, and onion in oil until vegetables are softened (about 10 minutes). Add tomatoes and cover pan. Continue to cook vegetables for 20 to 25 minutes or until mixture is soft. Transfer to mixing bowl and let cool. Beat eggs with 1/4 cup of the Parmesan cheese, parsley, basil and oregano. Add to vegetable mixture and salt and pepper to taste. Pour half of mixture into greased 9-inch pie pan and cover with 1/4 cup more Parmesan cheese. Cover with remaining mixture and the rest of the Parmesan cheese. Top with mozzarella cheese and bake in hot oven (400 degrees) for 40 minutes or until pie is set and cheese is golden. (Source: Sharing in the Kitchen, Susan Cadwallader.)

CACFP meal component credit:
meat and 1 vegetable

Children can help by:

- **cutting the zucchini and eggplant into pieces.** Zucchini and eggplant are soft enough to cut with a plastic knife. However, in order for the children to cut zucchini and eggplant into pieces, you should first slice the zucchini and eggplant for them. Some eggplant can be tough so you may want to slice it thinly. Have the children place the zucchini and eggplant slices flat on a cutting board or other flat surface. Instruct them to hold the knife blade lengthwise across the slices and press down with both hands. Then turn the knife crosswise and cut again.

More Fun: A Food Collage

A collage is more or less a picture made by gluing things to a surface. In this case, the children will be gluing various pictures cut out of a magazines and perhaps even dried beans and other dried food items to a piece of cardboard or thick paper. This activity gives children a hands-on chance to use their imagination. It is an activity that children of all ages can enjoy.

Making the food collage is only part of the fun. The collage can be used for many different games and activities that are fun for children and teach them about foods and nutrition. A few ideas for using the collage are provided here. You will no doubt come up with many more games and activities of your own.

Materials needed:

- Old magazines, grocery store advertisements, seed catalogs, any printed materials with pictures of foods that the children can cut out or tear out.
- a piece of cardboard or thick paper
- scissors with round ends
- glue or modge-podge (Modge-podge is a non-toxic glue that can also be used as a coating. You brush it over the collage and it dries clear giving the collage a glazed look. You can also use clear contact paper or co-laminating paper to coat the collage.)
- dried foods like dry beans and dry peas, pastas, oatmeal, rice (optional). (Watch the younger children around these foods. They can easily choke on dry beans if they put them in their mouths.)

Making the Collage:

Most children 3 years old and older can use scissors with round ends to cut out pictures. Younger children can tear out pictures. Let the children glue the pictures to the cardboard or thick paper arranging them in any order. The kinds of pictures children use will depend on how you plan to use the collage once it is made. You can also use dried foods like dry beans and dry peas, pasta, oatmeal, corn husks and rice in the collage. This makes it 3 dimensional and provides you with good materials for discussing textures and shapes. After the children have completed the collage, you may want to let them brush over it with modge-podge or a similar product. This puts a protective coating on the collage and makes it hold up better with frequent use. It can be purchased at most art and crafts stores.

Regardless of the way you plan to use the collage, you will probably want it to have a theme. For example, you might want only pictures of vegetables in the collage, or only foods. You may want to use a color theme, for example pictures that are primarily red. You may decide to let the children use any pictures they select, as long as there are pictures of foods from each of the food groups. Your theme will depend on how you plan to use the collage once it is made. You should have a pretty good idea about how you will use it before you get the children started. Here are some suggestions to consider.

Activities Using the Food Collage:

There are many fun activities for children using the food collage. The activities you choose will depend in part upon the age of the children in your care.

For 2 and 3 year olds:

- If you have both food and non-food pictures in the collage, ask the children to point to pictures of things that we eat and things that we do not eat.
- Ask them to point to something they like to eat, or perhaps to a favorite food.
- You can also use the collage to help children learn colors and shapes. Ask them to point to a red food. How many pictures of green foods can they find? Can they find a round food?
- Children this age are also learning the names of foods. Show them two different foods and ask them to name them. Then ask them which food is bigger and which food is smaller. Ask them to find a cherry in the food collage, a squash, a slice of bread, or some other food item.
- If you used dried foods in your food collage, ask them to find a piece of pasta and a picture of a plate of cooked pasta. Did they know how pasta looked before it was cooked? Which one is hard and which one is soft?

For 4 and 5 year olds:

Four and five year olds may still enjoy the activities above. In addition, you might try these suggestions.

- Four and five year olds are beginning to understand that food can be placed in different categories or groups, like vegetables, fruits, and grains. Ask them to see how many pictures of vegetables they can find in the food collage. How many pictures of fruits?
- They should also know many foods by their names. Ask them to see how many pictures of carrots they can find. How many pictures of apples?
- Let them use the collage to show you what they had for breakfast, or what they had for dinner last night. Let them help you plan tomorrow's lunch menu by pointing to the foods they would like to have. Did they include foods from each of the food groups? Is it a well balanced meal?
- Try showing them what you have planned for lunch and ask them to point to a food that would make the meal complete.
- Four and five year olds are also beginning to understand that some foods are used to make other foods. Can they point to pictures of the foods used to make macaroni and cheese? Can the identify the vegetables that you regularly put in your green salads? Can they find pictures of some different food products made from tomatoes, for example tomato juice and ketchup.

There are many fun variations of the food collage idea. For example, you could make a different collage for each food group. In addition, the food collage could be a group project or an individual project with each child making his or her own. Both are good for children for different reasons. You decide what will be the most enjoyable for the children in your care.

BEAN STUFFED TOMATO SALAD

(Makes 8 servings of 1/2 stuffed tomato each.)

Dry beans, cooked	2 cups
ham, diced	1/2 cup
green pepper, finely chopped	1 cup
tart salad dressing	1/3 cup
salad greens	3/4 cup
tomatoes	4 whole
onion, cut into thin rings	1/4 cup

Combine beans, meat, green pepper and dressing; mix well. Split tomatoes in quarters two-thirds of the way through. Spread tomatoes open and fill center with mound of bean mixture. Serve on salad greens and garnish with onion rings.

(Source: Child Care Cooks: Simple Nutritious and Super Delicious Recipes, Child and Adult Care Food Program. Nutrition Bureau, Public Health Division, Dept. of Health, Sante Fe, New Mexico.)

CACFP meal component credit:
meat and 1 vegetable

Children can help by:

- **washing the salad greens.** Let the children wash the lettuce leaves and/or other salad greens. Ask them to show you a big lettuce leaf and a small lettuce leaf. Are some lettuce leaves lighter in color than others?

- **making a bed with the salad greens.** Let the children tear the lettuce and other greens and arrange them to make a bed for their stuffed tomato.

- **filling the center of the tomatoes.** The children can use a spoon to scoop up the filling. Spread the tomato open for them and let them place the filling in the center of the tomato. Do they understand the concept of center? Ask them to show you where the center of the tomato is.

SQUASH-A-LA-POSH

(Serves 8.)

squash	1 cup
onion	1/8 cup
tomato	1/2 cup
green pepper, chopped	1/2 cup
cheese, grated	12 ounces
bread crumbs	2 cups
margarine	1/4 cup

Layer squash, onion, tomato, pepper, bread crumbs and cheese in a baking dish. Season if desired. Sprinkle top with remaining bread crumb and cheese. Cover and bake at 350 degrees for 45 minutes. Uncover, bake 15 minutes longer until tender.
(Source: Child Care Cooks: Simple Nutritious and Super Delicious Recipes, Child and Adult Care Food Program, Nutrition Bureau, Public Health Division, Dept. of Health, Sante Fe, New Mexico.)

CACFP meal component credit:
meat and 1 vegetable

Children can help by:

- **layering ingredients.** Instruct the children on the order of the ingredients and let them construct the casserole. Make sure they have washed their hands. Casseroles with layered ingredients, such as this one, are a good opportunity for teaching concepts like first, second and third, or, bottom, top and middle. Do they know what layered means? What other foods involve layers? What about hamburgers or sandwiches?

- **sprinkling the top with bread crumbs and cheese.** Let the children sprinkle the top of the casserole with the remaining bread crumbs and cheese. Ask them to name some of the different kinds of bread.

BUSY DAY DINNER - Tuna/Potato/Vegetables

(Serves 4 children.)

baking potatoes,	2 large
vegetable oil	
garlic, pressed	1 clove
mushrooms, fresh sliced	1 1/2 cup
onion, diced	1/2 cup
carrots, diced	1/2 cup
green pepper, chopped	1/2 cup
margarine	2 tablespoons
flour	2 tablespoons
milk	1 cup
lemon juice	1 tablespoon
thyme	1/2 teaspoon
tuna in water	1 can (61/2 ounces)

Wash potatoes, prick with fork, and rub skins with oil. Bake at 400 degrees for 1 hour or until done. Meanwhile, saute vegetables and garlic in 1 tablespoon margarine until vegetables are tender-crisp. Add remaining 1 tablespoon margarine to sauted vegetables. Stir in flour and cook until blended. Add lemon juice and thyme and cook over low heat for 5 minutes. Don't allow mixture to boil. Drain tuna and stir into mixture. Split potatoes lengthwise through center and spoon tuna mixture over each. (Source: Off To A Good Start, Catherine Romaniello and Nancy Van Domelen.)

CACFP meal component credit:
2 vegetables

Children can help by:

- **washing vegetables.** Let the children scrub the potatoes and carrots with a soft brush. They can also wash the mushrooms and green pepper. Instruct them to be gentle with the mushrooms. Just for fun you can also have them separate the mushroom tops (or caps) from the stems.
- **slicing mushrooms.** Children can slice the mushrooms with a plastic knife. Make sure their hands are clean and they have a good surface for cutting. Instruct them in using a knife safely and supervise them closely.

SOUPS

Children need to spend some time outdoors, even during winter months. Soups are a great way to warm them up. When you make soup, make some extra for the freezer. Freeze it in containers that hold the right amount for 1 snack or meal and let it thaw out for serving on a busy day.

BROCCOLI SOUP

(Makes 4 servings, 1 cup each.)

chopped broccoli (See Note)	1 1/2 cup
diced celery	1/4 cup
chopped onion	1 cup
unsalted chicken broth	1 cup
skim, 2%, or whole milk	2 cups
cornstarch	2 tablespoons
salt	1/4 teaspoon
pepper	dash
thyme	dash
grated Swiss cheese	1/4 cup

Place vegetables and broth in saucepan. Bring to boiling, reduce heat, cover, and cook until vegetables are tender- about 8 minutes. Mix milk, cornstarch, salt, pepper, and thyme; add to cooked vegetables. Cook, stirring constantly, until soup is slightly thickened and mixture begins to boil. Remove from heat. Add cheese and stir until melted.

Note: 10 ounce package of frozen chopped broccoli can be used in place of the fresh broccoli.

(Source: Preparing Foods and Planing Menus Using the Dietary Guidelines, U.S. Dept. of Agriculture.)

CACFP meal component credit:
1 vegetable

Children can help by:

- **measuring ingredients.** There are several ingredients for children to measure. As they are measuring, talk to them about the concepts of full and empty, more and less, same amount and different amount.

- **add cheese and stir until melted.** Let each child add cheese to his/her individual serving of soup and stir until the cheese melts. Serve the soup in a large deep bowl so it can slosh a little as they stir without sloshing out.

CAPITOL HILL BEAN SOUP

(Makes 8 servings, 1 cup each.)

Dry pea (navy) beans	1-1/2 cups
Boiling water	7 cups
Ham hock	1 small
Potato, pared	1 medium
Onion, chopped	1 cup
Celery, stalks and leaves, finely chopped	1 cup
Parsley, chopped	2 tablespoons
Garlic, finely chopped	1/2 clove
Salt	1/2 teaspoon
Pepper	1/8 teaspoon

Add beans to boiling water. Return to boil and boil 2 minutes. Remove from heat, cover, and soak overnight in refrigerator. Add ham hock and potato. Bring to boil, cover, and boil gently 1 hour. Remove potato; mash with a fork. Stir into beans with remaining ingredients. Cook 1 hour longer. Remove ham hock and separate meat from skin, fat, and bone. Cut meat into small pieces; add to soup. Heat to serving temperature. (Source: Dietary Guidelines for Americans, U.S. Dept. of Agriculture.)

CACFP meal component credit:
meat

Children can help by:

- **mashing the potato with a fork.** Cut the potato into pieces so that each child has a piece to mash. Show them how to safely mash the potato using the fork. Supervise them closely during this activity.

- **measuring the ingredients.** The full cup measurements, such as those for celery and onion, are good measurements to use in introducing the concept of measuring to children. Cup measurements are also good in teaching the concepts of empty and full.

BEEF-POTATO SOUP

(Makes 4 servings, 1 1/4 cup each.)

Lean ground beef	1/3 pound
Water	3 cups
Onions, sliced	1 cup
Celery, chopped	1/2 cup
Salt	1/2 teaspoon
Pepper	1/8 teaspoon
Bay leaf	1
Whole cloves	2
Potatoes, sliced	1 1/2 cups
Carrots, shredded	1/2 cup
Parsley, chopped	2 teaspoons

Brown beef in hot 2-quart saucepan. Turn carefully as needed to brown on all sides; keep meat in chunks. Drain fat. Add water, onions, celery, and seasonings to beef. Bring to boiling, reduce heat, and cook slowly for 30 minutes. Add potatoes, carrots, and parsley. Cook until potatoes are tender, about 15 minutes. Remove bay leaf and cloves before serving. (Source: Making Bag Lunches, Snacks, and Desserts Using the Dietary Guidelines, U.S. Dept. of Agriculture.)

CACFP meal component credit:
meat and 1 vegetable

Children can help by:

- **adding ingredients.** Let the children add the ingredients with your close supervision. Be especially careful if they are adding ingredients to the soup when it is hot. Can they name each of the ingredients as they add them? Let them smell the bay leaf and the cloves. Can they name any other spices or herbs?
- **shredding carrots.** Shredding carrots requires more strength than grating cheese, but most 4 year olds can probably do it. Let them use a plastic grater if you have one. When the carrot gets relatively small you should do the shredding. Otherwise the children might scrape their fingers on the grater.

CHICKEN STEW

(Makes 4 servings, 1 cup each.)

Chicken breast halves, without skin	2
Water	1 1/2 cups
Salt	1/4 teaspoon
Whole cloves	2
Bay leaf	1
Frozen mixed vegetables	2/3 cup
Potatoes, pared, diced	2/3 cup
Onion, chopped	1/2 cup
Celery, sliced	1/4 cup
Tomatoes	1 cup (1/2 16-ounce can)
Ground thyme	1/4 teaspoon
Pepper	1/8 teaspoon
Flour	1/4 cup
Water	1/4 cup

Cover and cook chicken in water with salt, cloves, and bay leaf until tender--about 45 minutes. Remove chicken from broth. Separate meat from bones. Dice meat. Skim fat from broth. Discard cloves and bay leaf. Add water to make 2 cups. Cook mixed vegetables, potatoes, onion, and celery in broth for 10 minutes. Break up tomatoes; add tomatoes, thyme, and pepper to broth mixture. Cook slowly for 15 minutes. Add chicken. Mix flour and water until smooth. Stir into chicken mixture. Cook, stirring constantly, until thickened--about 1 minute.
(Source: Making Bag Lunches, Snacks and Desserts, U.S. Dept. of Agriculture.)

CACFP meal component credit:
meat and 1 vegetable

Children can help by:

- **measuring ingredients.** Let the children help you measure the ingredients. The younger children will do best using the measuring cup. Show them the mark on the cup where the vegetable should reach. Use this to teach them the concepts of too much and too little or more and less. Older children may have the dexterity needed to use the teaspoon measurement. They may not understand that they are adding 1/8 teaspoon, but they will understand that the measuring spoon is either empty or full.

VEGETABLE SOUP

(Makes 4 servings, 1 cup each.)

Potatoes, diced	1 cup
Cabbage, chopped	1 cup
Onion, chopped	1/2 cup
Celery, diced	1/2 cup
Carrots, sliced	1/2 cup
Frozen green beans	1/2 cup
Oregano leaves	1/4 teaspoon
Marjoram leaves	1/4 teaspoon
Salt	1/4 teaspoon
Bay leaf	1
Pepper	Dash
Water	2 cups
Tomatoes	1 cup (1/2 16-ounce can)

Place all ingredient except tomatoes in a saucepan. Cover and boil gently for 10 minutes. Break up tomatoes; add to vegetable mixture and continue cooking until vegetables are tender--about 20 minutes. Remove bay leaf before serving.

(Source: Making Bag Lunches, Snacks, and Desserts, U.S. Dept. of Agriculture.)

CACFP meal component credit:
2 vegetables

Children can help by:

- **washing vegetables.** The children can wash the celery and scrub the carrots and potatoes with a soft brush. Be sure they clean up any spilled water so that no one slips. Talk about the importance of washing vegetables.

- **measuring ingredients.** There are many ingredients for the children to measure. As they measure each vegetable and put it in the pot for cooking, ask them to remember another time when they ate that vegetable. Talk about the many ways you have prepared that vegetable for them. When they measure and add the bay leaf and cloves, let them smell them. Talk about other herbs that may be familiar to them.

HEARTY VEGETABLE BEEF SOUP

(Makes 4 servings, 1 cup each.)

unsalted chicken broth	10 1/2-ounce can
Water	1/2 cup
Frozen mixed vegetables for soup	2 cups
Tomatoes, broken up	16-ounce can
Beef, cooked, diced	1 cup
Thyme leaves, crushed	1 teaspoon
Pepper	Dash
Salt	1/4 teaspoon
Bay leaf	1
Narrow-width noodles, uncooked	2 ounces (about 1 1/4 cups)

Heat broth and water. Add vegetables, meat, and seasonings. Bring to boil, reduce heat, and boil gently, uncovered, for 15 minutes. Add noodles. Cook until noodles are tender, about 10 minutes. Remove bay leaf. (Source: Shopping For Food and Making Meals in Minutes, U.S. Dept. of Agriculture.)

CACFP meal component credit:
meat and 1 vegetable

Children can help by:

- **measuring ingredients**. Let the children help you measure the ingredients. Show them the dried noodles. Save one dried noodle that you do not cook. After the soup is done, let them compare a cooked noodle with the uncooked noodle. This is not only a good opportunity to talk about the different forms food can take, but it offers a fun way to introduce the concepts of before and after.

- **setting the table.** On a piece of notebook paper, draw a place setting . Illustrate where the silverware, plate, napkin and glass go when you set the table. Let the children use this as a model in setting the table. Can they count the number of people who will eating? Are there enough places set at the table? How many forks did they use ? How many spoons?

CHICKPEA SOUP

(Serves 4.)

Large cloves garlic, peeled	4
Olive oil	1/3 cup
Rosemary leaves, finely crushed	1 1/2 teaspoons
Canned Italian tomatoes, roughly chopped with juice	2/3 cup
Chickpeas, drained	2 cans
Beef broth	1 cup or
1 bouillon cube dissolved in 1 cup water	
Salt and freshly ground pepper to taste	
Grated Parmesan cheese optional	

In a medium saucepan over medium-high heat, saute whole garlic cloves in olive oil until they are a nutty brown. Remove garlic. Add crushed rosemary, and stir; then immediately add the chopped tomatoes with the juice. Cook over medium heat for 20 minutes. Add the drained chickpeas to the tomato sauce and stir. Add the broth, stir, and bring to a simmer. Simmer 15 minutes. Taste and, if necessary, add salt and pepper to taste. Serve immediately, as is, or puree all or part of the soup in a blender, food processor or food mill, and reheat to serving temperature. Serve with grated cheese.

(Source: The Atlanta Journal/The Atlanta Constitution, August 20, 1992.)

CACFP meal component credit:
meat

Children can help by:

- **dissolving the bouillon cube in 1 cup of water.** Let each child have a turn at stirring until the bouillon cube dissolves.

- **mashing chickpeas with a fork.** According to this recipe you can leave the chickpeas and tomatoes whole or you can puree all or part of the soup in a food processor or blender. As an alternative, why not let each child mash some chickpeas in a bowl and then return them to the soup. This will thicken the broth and give the children an opportunity to participate in meal preparation. To save yourself from having extra dishes to wash, let them use the bowl they will eat from later.

More Fun: Take a Field Trip

Field trips can be a nice break for you as well as the children. They can also be an exciting way to teach children about foods. For example, one provider reported that she regularly took her children to the farmer's market during times of the day when the market was not too busy. She found that the farmers seemed to enjoy talking to the children and were actually great teachers when it came to teaching children about foods. In addition, they frequently gave the children samples of the fruits and vegetables they were selling. This provider found that a trip to the farmer's market was an excellent way to introduce children to new fruits and vegetables and to get them to taste ones they had been reluctant to try. The children were much more willing to try new fruits and vegetables when they were offered at the farmer's market, than when she offered a taste at home.

Here are some things to consider when you are planning a field trip for the children in your care.

- Be sure parents know where you will be going and when you plan to be there. You need to make sure that parents can locate their child in case of an emergency. In some states you are required to have the parents sign a field trip permission slip. Make sure you know the requirements in your state.

- Make sure the children travel safely. Follow your state's requirements regarding seat belts and car seats.

- Be sure you can properly supervise the children. Children usually become excited on field trips and may be more difficult to keep track of in a new environment. Depending on the children you care for and where you are taking them, you may want some assistance. You may be able to get a parent or neighbor to volunteer for occasional field trips. If not, perhaps there is an older teen in your neighborhood who can help during field trips after school hours.

- When possible, visit field trip sites when they are the least busy. In some cases you may need to get permission from the person in charge. With enough notice, some field trip sites will arrange special tours and tastings for the children.

- Consider meeting another provider with her children at a field trip site. It may make the field trip more enjoyable for you and will give the children a chance to meet other children.

Here are some places that you and the children might visit.

- **the farmer's market**
- **a cannery**
- **a restaurant**
- **an orchard**
- **the kitchen of a local school**
- **a dairy farm**
- **a grocery store**
- **a bakery**
- **a soup kitchen**
- **a food bank**
- **a food co-op**
- **a cooking school**
- **a vegetable garden or commercial farm**
  (This could be a large commercial farm or just a neighbor's garden. Your county extension agency may know of a commercial farm in your area. You might also contact the agriculture or horticulture department at a local college or university. They may sponsor experimental gardens or orchards the children could visit.)
- **a botanical garden**
  (Botanical gardens usually have herb gardens and sometimes have small vegetable gardens. They may also sponsor special programs for children. Most botanical gardens charge an admission fee but some also have certain days or times when admission is free.)

SNACKS

Nutritious snacks are very important for children. Without nutritious snacks it is difficult for children to get all of the calories and nutrients they need. Here are several recipes for snack foods that are nutritious, delicious and fun.

CHILIBEAN DIP

(Makes about 1 1/3 cups)

Kidney beans	15-ounce can
Drained bean liquid	3 tablespoons
Vinegar	1 tablespoon
Chili powder	1 teaspoon
Ground cumin	1/8 teaspoon
Onion, grated	2 teaspoons
Parsley, chopped	2 teaspoons

Drain kidney beans; save liquid. Place drained beans, bean liquid, vinegar, and seasonings in blender. Blend until smooth. Remove mixture from blender. Stir in onion and parsley. Chill thoroughly. Serve with crisp vegetable sticks.
(Source: Dietary Guidelines for Americans, U.S. Dept. of Agriculture.)

CACFP snack component credit:
meat (snack only)

Children can help by:

- **stirring in the onion and parsley.** Let the children add the onion and parsley and stir it in the chilibean mixture. What color is parsley? What vegetables are that color? What color is onion? Are there other vegetables that color?

SPINACH SURPRISE DIP

Fresh chopped spinach, chopped very fine	2 cups
Parsley	2 cups
Sour Cream	1/4 cup
Plain Nonfat or Lowfat Yogurt	1/4 cup
Green onions, including tops, chopped very fine	1 cup

Mix all together and serve with fresh vegetables or crackers. (Source: Off To A Good Start: Practical Nutrition For Children, Catherine Romaniello and Nancy Van Domelen.)

CACFP snack component credit:
1 vegetable

Children can help by:

- **arranging the snack tray.** Put the dip in a bowl and get out the crackers and/or fresh vegetable slices you plan to serve with the dip. Give the children a large tray and place the bowl of dip in the middle. Then let the children make a snack tray by arranging the vegetables and crackers around the bowl. Make sure their hands are clean before they begin this activity. Talk about the colors, shapes, and tastes of the vegetables.

PINEAPPLE CHEESE SPREAD

(Makes about 1 cup.)

Mozzarella cheese, part skim milk	6 ounces
Crushed pineapple, juice-packed, undrained	1/3 cup
Pineapple juice	1 tablespoon

Cut cheese into small pieces. Mix ingredients in a blender, scraping sides of blender often. Blend until mixture is smooth and creamy. Serve on unsalted whole-wheat crackers.
(Source: Making Bag Lunches, Snacks and Desserts Using the Dietary Guidelines, U.S. Dept. of Agriculture.)

CACFP snack component credit:
meat alternate (snack only)

Children can help by:

- **cutting cheese cubes.** Children can make cheese cubes using a plastic knife. First slice the cheese and put the slices on a cutting surface. Instruct the children to hold the knife blade lengthwise across the slices and press down with both hands. Have them make a few cuts in this direction and then turn the knife crosswise and make cuts in the other direction. Use the cubes to talk about different shapes and the concepts of larger and smaller. Compare tastes. The cheese is salty and the pineapple is sweet.

CHICKEN SPREAD

(Makes about 1 cup.)

Chicken, cooked, finely chopped	1 cup
Celery, chopped	1 tablespoon
Crushed pineapple, juice-packed, undrained	1 tablespoon
Curry powder	1/4 teaspoon
Salt	1/8 teaspoon
Salad dressing, mayonnaise-type	1 tablespoon

Mix chicken, celery, and pineapple. Stir curry powder and salt into salad dressing. Add to chicken mixture. Mix well. Serve on unsalted whole-grain crackers or in mini pita pockets. Refrigerate and use within 3 to 4 days.

(Source: Making Bag Lunches, Snacks and Desserts Using the Dietary Guidelines, U.S. Dept. of Agriculture.)

CACFP snack component credit:
meat

Children can help by:

- **spreading the chicken spread on crackers.** Give each child a plastic knife and let them spread the chicken spread on crackers. If possible, offer both round crackers and rectangle or square crackers. While they are spreading the chicken spread on the crackers, talk to them about shapes and the concepts of same and different. Ask them to point out crackers that are the same shape and crackers that are a different shape. Talk about other things that are round and other things that are square.

MEXICAN SNACK PIZZAS (As written this recipe is for snack time. However, if you were to double the recipe so that each child gets a whole muffin, this recipe could be served for lunch or supper.)
(Serves 4.)

Whole-wheat English muffins	2
Tomato puree	1/4 cup
Kidney beans, canned, drained, chopped	1/4 cup
Onion, chopped	1 tablespoon
Green pepper, chopped	1 tablespoon
Oregano leaves	1/2 teaspoon
Mozzarella cheese, part skim milk, shredded	1/4 cup
Lettuce, shredded	1/4 cup

Split muffins; toast lightly. Mix puree, beans, onion, green pepper, and oregano. Spread on muffin halves. Sprinkle with cheese. Broil until cheese is bubbly, about 2 minutes. Garnish with shredded lettuce.
(Source: Making Bag Lunches, Snacks, and Desserts Using The Dietary Guidelines, U.S. Dept. of Agriculture.)

CACFP snack component credit:
bread and meat (snack only)

Children can help by:

- **mixing the puree, beans, onion, green pepper and oregano.** Put these ingredients in a big bowl and let children take turns stirring until they are mixed well. Talk about the different colors of the ingredients.

- **spreading the mixture on the English muffin and sprinkling with cheese.** Let each child make his or her own snack pizza by spreading the mixture on the English muffin and sprinkling it with cheese. Be sure the children start with clean hands.

PEANUT BUTTER-DATE SPREAD

(Makes about 3/4 cup.)

"No-salt-added" peanut butter	1/2 cup
Dates, chopped	1/3 cup
Orange juice	3 tablespoons
Orange rind, grated	1/4 teaspoon

Mix all ingredients. Use as a spread on melba toast or lowfat crackers. (Source: Making Bag Lunches, Snacks and Desserts Using the Dietary Guidelines, U.S. Dept. of Agriculture.)

CACFP snack component credit:
meat (snack only)

Children can help by:

- **chopping dates.** The children can chop dates with a plastic knife or butter knife. Keep them seated and supervise them closely.

- **mixing ingredients.** Let the children stir the ingredients to mix them together. Give everyone a turn.

- **spreading the peanut butter - date spread on the crackers.** Put the spread in a bowl and place it within everyone's reach. Give each child a plastic knife or butter knife and let them spread the peanut butter date spread on the crackers.

STRAWBERRY-YOGURT POPSICLES

(Makes 12 popsicles.)

Frozen sweetened strawberries, thawed	2 cartons, (10 ounces each)
Unflavored gelatin	1 tablespoon
Plain lowfat yogurt	16 ounces
Paper cups, 3-ounce	12
Wooden sticks	12

Drain strawberries, reserving liquid. Place drained liquid in a saucepan and sprinkle with gelatin. Cook over low heat, stirring constantly, until gelatin dissolves. (The sweetened liquid sweetens the whole recipe). Mix strawberries, yogurt, and gelatin mixture in a blender until smooth. Place cups on a tray or in a baking pan. Fill with blended mixture and cover cups with a sheet of aluminum foil. Insert a stick for each popsicle by making a slit in the foil over the center of each cup. Freeze popsicles until firm. Run warm water on outside of cup to loosen each popsicle from the cup. (Source: Dietary Guidelines For Americans, U.S. Dept. of Agriculture.)

CACFP snack component credit:
fruit and meat alternate

Children can help by:

- **filling the cups with the mixture.** Put the mixture in a small container with a handle. Let the children pour the mixture into the cups. Let them take turns holding the cups steady for one another while they pour. During this activity talk with children about the value of cooperation and teamwork.

- **inserting the stick for each popsicle.** Let the children insert the popsicle sticks. Use this activity to talk about the concept of center. Can they find the center of the popsicle?

FRUIT JUICE CUBES

unflavored gelatin	1 1/2 tablespoons (1 1/2 envelopes)
water	3/4 cup
frozen grape or apple juice concentrate	6-ounce can

Very lightly grease 9-by-5 -inch loaf pan or plastic ice cube tray. Soften gelatin in water in a small saucepan for 5 minutes. Heat over low heat, stirring constantly, until gelatin dissolves. Remove from heat. Add fruit juice concentrate; mix well. Pour into pan. Cover and refrigerate. Chill until set. Cut into 1-inch cubes. Keep covered during refrigerator storage. (Source: Making Bag Lunches, Snacks and Desserts Using the Dietary Guidelines, U.S. Dept. of Agriculture.)

CACFP snack component credit:
fruit

Children can help by:

- **cutting the fruit juice cubes or other shapes.** Give the children a plastic knife or butter knife and let them cut the fruit juice gelatin into shapes. This is a great opportunity to teach children about circles, squares, and triangles. It is also a great opportunity to let children use their imagination in creating new and different shapes. If you have cookie cutters, let the children use them to make shapes. Talk about concepts like larger and smaller, same and different.

MINTY FRUIT SALAD

(Makes 12 portions.)

strawberries	1 pint
kiwi fruit	3
ripe cantaloupe	1 medium
ripe honeydew melon	1 medium
fresh mint leaves	1 handful
orange juice	1/2 cup
lemon juice	1/4 cup
sugar	3 tablespoons

Wash, drain and hull strawberries. Peel kiwis and slice thin, reserving 1 sliced kiwi for garnish. Peel and make cut cantaloupe and melon into chunks. Mix all fruit together except the reserved kiwi. Chop mint leaves and stems very fine and sprinkle on fruits. Mix orange and lemon juice with sugar and pour over all. Toss salad gently and thoroughly. Arrange reserved kiwi slices on top and garnish with a fresh mint leaf. Chill for 2 or 3 hours and serve cold.
(Source: The Silver Palate, Julee Rosso and Shelia Lukins.)

CACFP snack component credit:
2 vegetables

Children can help by:

- **washing and hulling strawberries.** The children can wash the strawberries and remove the stems. Urge them to be gentle. You may also want them to slice the strawberries into bite-sized pieces using a butter knife or a plastic knife.

- **cutting melon chunks.** Let the children use a plastic knife or butter knife to cut the melon in chunks. Teach them how to cut safely and supervise them closely. As they are cutting, use the melon chunks to illustrate the concepts of larger and smaller.

- **tossing the salad.** Put the salad in a large zip lock bag and let the children gently turn the bag over and over to mix it. They will enjoy seeing the fruit pieces mix as they turn the bag. Ask them to identify the colors they see in the fruit salad.

More Fun: A Children's Story

On the following page is the children's story "The Little Red House With No Windows and No Doors and A Chimney on Top and a Star in the Middle." This story has been around for a very long time. One provider remembered telling the story as many as 10 years ago. Try the story with the children in your care. You will need to have a red apple and a knife handy to make the story work. (You'll understand why after you read the story.)

To make the story more fun, involve the children in the telling. Encourage them to recite with you the phrase "little red house with no windows and no doors and a chimney on top and the star in the middle." Tell the story rather than reading it. Use lots of movement and vary the tone of your voice.

Visuals also make a story more interesting for children. When you are finished telling the story, ask them to guess what the little red house is. Show them the red apple. It has no windows and no doors, and a stem for the chimney, but where is the star in the middle? Cut the apple in half so that the top of the apple with the stem is one half, and the bottom part of the apple without the stem is the other half. Do you see the star? Use half of the apple to make apple prints. Let the children dip the apple half in red food coloring and then stamp a piece of white paper. It will make a red circle with a star in the middle. Use the other half of the apple, the half not dipped in the food coloring, for tasting.

The Little Red House With No Windows and No Doors and a Chimney on Top and a Star in the Middle

One day baby bear was bored and tired. He didn't have anything to do. He came to mama bear and said, "What can I do?" She said, "Go and get your crayons and color." He said, "I don't want to...sister bear gets to ride the yellow bus to school....I want to go to school." Mama bear said, "I have an idea. Go out and see if you can find a little red house with no windows and no doors and a chimney on top and a star in the middle."

Baby bear said, "Okay," and went outside to find the little red house with no windows and no doors and a chimney on top and a star in the middle. He passed farmer Brown's pasture and stopped to ask Mrs. Cow, "Mrs. Cow, have you seen a little red house with no windows and no doors and a chimney on top and a star in the middle?" Mrs. Cow said, "Mooo, no I haven't."

Baby bear went on and saw Mr. Bunny Rabbit in the forest. "Mr. Bunny Rabbit, have you seen a little red house with no windows and no doors and a chimney on top and a star in the middle?" "No," he said and he hopped away.

Just then Gink Gunk the frog jumped across Baby Bear's path. "Gink Gunk, have you seen a little red house with no windows and no doors and a chimney on top and a star in the middle?" The frog said, "No I haven't, but the wise old owl might know something." The frog hopped away.

Baby Bear climbed up the tree where the wise old owl lived. He asked the owl, "Wise old owl, have you seen a little red house with no windows and no doors and a chimney on top and a star in the middle?" "Yes I have," said the owl. "Go and see Willy the Worm."

Baby Bear found Willy the Worm and said, "Willy the Worm, have you seen a little red house with no windows and no doors and a chimney on top and a star in the middle?"

"Yes I have," said Willy the Worm. "That's where I live."

SALSA

(Makes about 1 cup.)

"no-salt added" tomato sauce	8-ounce can
chili peppers, canned, drained, finely chopped	1 tablespoon
green pepper, finely chopped	1/4 cup
onion, finely chopped	2 tablespoons
garlic, minced	1 clove
oregano leaves, crushed	1/4 teaspoon
ground cumin	1/8 teaspoon

Mix all ingredients thoroughly. Chill before serving to blend flavors. Serve with toasted pita bread, breadsticks, or raw vegetable pieces. (Source: Making Bag Lunches, Snacks and Desserts Using the Dietary Guidelines, U.S. Dept. of Agriculture.)

CACFP snack component credit:
You do not get credit for the salsa itself.
However, you may get credit for the food served with the salsa.

Children can help by:

- **preparing a tasting tray of foods to go with the dip.** Ask the children to suggest foods that would be good to dip in the salsa. If they don't mention foods like celery, carrots and bread sticks, suggest them yourself. Let the children arrange these foods and any they suggest on a tray with the dip placed in the center. Have a tasting party. Let each child taste different foods with the salsa and decide which combination they like best.

CURRY VEGETABLE DIP

(Makes about 1 cup.)

plain lowfat or nonfat yogurt	8 ounces
carrots, shredded	1/4 cup
green onions, minced	2 teaspoons
salad dressing, mayonnaise-type	1 tablespoon
sugar	1 teaspoon
curry powder	1/4 teaspoon
pepper	dash

Mix ingredients in a bowl. Chill. Serve with crisp raw vegetable pieces, such as celery, carrot, or summer squash sticks.
(Source: Making Bag Lunches, Snacks and Deserts Using the Dietary Guidelines.)

CACFP snack component credit:
meat (snack only)

Children can help by:

- **measuring ingredients.** Let the children help by measuring the ingredients. The younger children will have an easier time measuring the carrots (because they are measured with a measuring cup) and the salad dressing (because it is not likely to spill if they tip the spoon.) Let the older children measure the items that require using a measuring spoon.

- **mixing ingredients.** After the children measure the ingredients, have them put the ingredients in a big bowl. Give them a spoon with a long handle and let them stir until the ingredients are mixed well. If there are any children who did not get a turn at measuring ingredients, make sure they get to stir.

RAISIN WHOLE-WHEAT BREAD PUDDING

(Makes 4 servings, about 1/2 cup each.)

whole-wheat bread, cut in 1-inch cubes	1 1/2 cup
raisins	1/3 cup
sugar	2 tablespoons
ground cinnamon	3/4 teaspoon
egg	1
vanilla	1/4 teaspoon
skim milk	1/4 cups

Preheat oven to 325 degrees. Place bread cubes in 1-quart casserole. Sprinkle with raisins. Mix sugar and cinnamon. Stir in egg. Add vanilla. Heat milk; slowly stir into egg mixture. Pour over bread. Bake until tip of knife inserted in center comes out clean- about 40 minutes.
(Source: Making Bag Lunches, Snacks and Desserts Using the Dietary Guidelines, U.S. Dept. of Agriculture.)

CACFP snack component credit:
bread

Children can help by:

- **cutting or tearing the bread.** Let the children put the bread slices on a cutting board and cut them with a plastic knife or butter knife. Keep them seated during this activity and supervise them closely. If the children you care for are too young for this activity, even with supervision, let them tear the bread in chunks.

WHOLE-WHEAT RAISIN COOKIES

(Makes about 5 dozen cookies.)

whole-wheat flour	1 cup
all-purpose flour	1 cup
baking powder	1-1/2 teaspoons
cinnamon	1/2 teaspoon
salt	1/4 teaspoon
vegetable shortening	2/3 cup
brown sugar, packed	1/3 cup
egg	1
skim milk	1/4 cup
vanilla	1 teaspoon
raisins, chopped	1 cup

Preheat oven to 350 degrees. Grease baking sheet. Mix dry ingredients except sugar. Mix shortening and sugar until creamy. Add egg, milk and vanilla. Mix well. Stir in dry ingredients. Add raisins. Mix well. Drop dough by teaspoonfuls onto baking sheet, about 1 inch apart. Bake until lightly browned, about 9 minutes. Remove from baking sheet. Cool on rack.

(Source: Dietary Guidelines For Americans, U.S. Dept. of Agriculture.)

CACFP snack component credit:
bread

Children can help by:

- **dropping spoonfuls of cookie dough onto the baking dish.** Let the children get a spoonful of cookie dough and drop on the cookie sheet. Use this activity to teach children about lines or rows.

FROZEN FRUIT POPS

bananas, mashed	1 cup
frozen sliced strawberries, partially thawed	1 package (10-ounces)
crushed pineapple, undrained	1 can (13 1/2 ounces)
evaporated milk	2/3 cup

Combine bananas and strawberries; beat thoroughly. Stir in pineapple. Add milk gradually, beating until blended. Spoon into paper cups. Insert popsicle stick or plastic spoon into center of each cup. Freeze until solid. Peel off paper and serve.
(Source: Off To A Good Start: Practical Nutrition for Children.)

CACFP snack component credit:
2 fruits

Children can help by:

- **mashing bananas.** Put 1 or more pieces of bananas in a bowl and let the children mash it with a fork. Forks are sharp and can be dangerous. Be sure you teach children how to use them safely and supervise them closely.

- **spooning the mixture into paper cups and adding the popsicle stick.** Let the children spoon the mixture into the paper cups. Let them put the popsicle stick in the center. Do they know what the center is? Can they find the center? After they are done let them lick the spoons.

CARROT-PINEAPPLE CUPCAKES

(Makes 8 cupcakes.)

whole-wheat flour	1 cup
sugar	1/3 cup
baking powder	1 teaspoon
baking soda	1/2 teaspoon
cinnamon	1 teaspoon
nutmeg	1/4 teaspoon
salt	1/8 teaspoon
egg, beaten	1
oil	1/4 cup
carrots, shredded	1 cup
crushed pineapple, juice pack, drained	1/2 cup
vanilla	1 teaspoon

Preheat oven to 350 degrees. Place paper baking cups in muffin tins. Mix dry ingredients thoroughly in mixing bowl. Add remaining ingredients and mix well. Fill baking cups two-thirds full. Bake 20 minutes or until top springs back when touched lightly.
(Source: Dietary Guidelines For Americans, U.S. Dept. of Agriculture.)

CACFP snack component credit:
bread

Children can help by:

- **measuring ingredients.** Even the 2 year olds can participate in this activity, but they will need assistance from you. Most 2 year olds are too young to learn measurements like 1/2 cup or 1/4 teaspoon. However, they can understand the concepts of empty and full. With measurements that require a measuring spoon, give them the right sized spoon and tell them to add 1 spoonful. With the measuring cup, show them the appropriate measurement line on the cup and instruct them to fill the cup to that line. Teach them the concepts of more and less.

- **filling baking cups.** The children can take spoonfuls of batter and fill the baking cups. Point out to them how gooey the batter is and talk to them about how cooking will change it. If you have enough batter, you might even save some raw so that they can compare the batter before it is cooked and after it is cooked. Use this activity to introduce them to the concepts of before and after.

WHOLE-WHEAT APPLE MUFFINS

(Makes 12 muffins.)

whole-wheat flour	2 cups
baking powder	1 tablespoon
salt	1/2 teaspoon
ground cinnamon	1 teaspoon
skim milk	3/4 cup
egg whites, slightly beaten	2 (or 1 whole egg)
oil	1/4 cup
honey	1/4 cup
tart apples, pared, chopped	1 cup

Preheat oven to 375 degrees. Grease muffin tins. Mix dry ingredients thoroughly. Mix remaining ingredients. Add to dry ingredients. Stir until dry ingredients are barely moistened. Batter will be lumpy. Fill muffin tins. Bake until lightly browned, about 20 minutes.
(Source: Dietary Guidelines for Americans, U.S. Dept. of Agriculture.)

CACFP snack component credit:
bread

Children can help by:

- **filling muffin tins.** Let the children use spoons to fill the muffin tin. Count along with them to see how many spoonfuls of dough it takes for each muffin. Use the muffin tin to help children understand rows and lines. Do they ever stand in a line or row? If so, when? Identify certain objects in the room and ask the children to put them in a row or line.

PUMPKIN MUFFINS

(Makes 24 muffins.)

whole-wheat flour	1 1/2 cups
all-purpose flour	1 cup
sugar	3/4 cup
baking powder	2 tablespoons
ground cinnamon	2 teaspoons
ground nutmeg	1/2 teaspoons
salt	1/4 teaspoon
eggs, slightly beaten	3
skim milk	1 cup
oil	1/2 cup
canned pumpkin	1 cup
raisins, chopped	3/4 cup
vanilla	1 tablespoon

Preheat oven to 350 degrees. Place 24 paper baking cups in muffin tins. Mix dry ingredients thoroughly. Mix remaining ingredients; add to dry ingredients. Stir until dry ingredients are barely moistened. Fill paper cups two-thirds full. Bake about 20 minutes or until toothpick inserted in center comes out clean. Remove from muffin tins and cool on rack. Freeze muffins that will not be eaten in the next few days.
(Source: Making Bag Lunches, Snacks and Desserts Using the Dietary Guidelines, U.S. Dept. of Agriculture.)

CACFP snack component credit:
bread

Children can help by:

- **mixing ingredients.** Put the dry ingredients in a zip lock bag and let the younger children shake the bag to mix them. The older children can mix the wet ingredients. Put wet ingredients in a bowl with high sides and let the children mix using a wisk. As you add the cinnamon and nutmeg, give the children a whiff. Help them learn to identify spices and herbs by their odor. Have they smelled cinnamon before? If so, when.

ORANGE-APRICOT COOKIES

(Makes about 4 dozen cookies.)

all-purpose flour	1 cup
whole-wheat flour	3/4 cup
sugar	1/4 cup
baking powder	2 teaspoons
ground cinnamon	1/2 teaspoon
salt	1/4 teaspoon
dried apricots, chopped	3/4 cup
orange juice, fresh	1/2 cup
oil	1/4 cup
orange rind, grated	1 teaspoon
egg, beaten	1

Preheat oven to 375 degrees. Mix dry ingredients thoroughly. Add remaining ingredients. Mix well. Drop dough by teaspoons onto ungreased baking sheet, about 1 inch apart. Bake about 11 minutes or until lightly browned. Remove from baking sheet while still warm. Cool on rack. (Source: Making Bag Lunches, Snacks and Desserts Using the Dietary Guidelines, U.S. Dept. of Agriculture.)

CACFP snack component credit:
bread

Children can help by:

- **chopping dried apricots.** Let the children use a plastic knife or butter knife to chop apricots. Dried apricots can be tough, so it make take more of sawing motion for children to cut them. Show the children how to use the knife safely, keep them seated and supervise them closely .If you see that the task is too difficult and the children are getting frustrated, move to another activity. Plan an alternative activity like mixing for the younger children.

- **beating eggs.** Put the eggs in a bowl with steep sides so that the eggs do not easily slosh out. Show the children how to beat them with a wisk. Give everyone a turn.

OATMEAL APPLESAUCE COOKIES

(Makes about 5 dozen cookies.)

all-purpose flour	1 cup
baking powder	1 teaspoon
ground allspice	1 teaspoon
salt	1/4 teaspoon
margarine	1/2 cup
sugar	1/2 cup
egg whites	2
rolled oats, quick-cooking	2 cups
unsweetened applesauce	1 cup
raisins, chopped	1/2 cup

Preheat oven to 375 degrees. Grease baking sheet. Mix flour, baking powder, allspice, and salt. Beat margarine and sugar until creamy. Add egg whites; beat well. Add dry ingredients. Stir in oats, applesauce, and raisins. Mix well. Drop by level tablespoons onto baking sheet. Bake 1 minutes or until edges are lightly browned. Cool on rack.
(Source: Making Bag Lunches, Snacks and Deserts Using the Dietary Guidelines, U.S. Dept. of Agriculture.)

CACFP snack component credit:
bread

Children can help by:

- **measuring and stirring in oats, unsweetened applesauce, and raisins.** Let the children measure and add the oats, applesauce and raisins. The oat and applesauce containers are probably too large for them to pour from. Let them spoon the ingredients from these containers to the measuring cup. Let one child add the ingredient while another is stirring. Use this activity to talk to children about the importance of teamwork and cooperation.

- **dropping level tablespoons of dough onto the baking sheet.** You will have to show children what a level tablespoon is and how to make one. Show them how to take a spoonful and rake their finger across the top to knock off any extra dough and level the tablespoon. After they have leveled the tablespoon, show them how to use their finger again to push the dough out of the spoon onto the baking sheet. Make sure they have washed their hands before they begin this activity.

CHAPTER 5

PROTECTING CHILDREN'S HEALTH: PREVENTING INFECTIOUS DISEASE AND FOODBORNE ILLNESS

INTRODUCTION...

In the introduction you will read about:

children and germs | page 2
how this chapter is organized | page 2

This manual was made possible by an educational grant from Nestle USA, Inc. to Save The Children Child Care Support Center.

Children and Germs

Almost any provider who has been in business for a while has had at least one parent who has complained that their child was never sick until placed in her care. Many parents insist that it must somehow be the provider's fault. If a provider does not follow proper sanitation procedures, there is room for criticism. However, getting sick is, to some extent, just a natural part of childhood. But by working together, providers and parents *can minimize* the risk of disease.

Through good sanitation practices a provider can reduce the spread of infectious disease in her family child care home. There may be times when parents need reassurance that as a professional, caring provider you follow these sanitation procedures closely. In addition, you may want to share these procedures with the parents. Parents also play a role in preventing the spread of disease in the child care home. Remind them that they can do their part by following good sanitation procedures at home and by not bringing sick children to child care.

No matter how careful you and the child's parents are in preventing the spread of disease, children will get sick and will spread the disease to others in the home. Children are easy targets for the germs that cause infectious diseases. Their young immune systems just do not provide them with much protection. In addition, there are several characteristics of the child care environment that make it easy for infectious diseases to spread.

First, child care brings together children from different families, all with different assortments of germs. As a result, children become exposed to some germs for the first time when they are in child care. They may get sick more often until they have built up an immunity to these germs.

Secondly, diapers and the process of changing diapers provides many opportunities for diseases to spread. If you are caring for several children in diapers, keeping children, their toys and play area, and your diaper changing area sanitary is a big challenge.

Thirdly, one of the ways children explore their world is by placing things in their mouths. Young children frequently place toys in their mouths and then share them with other children who also place the toys in their mouths. They are not only sharing the toy, but they are also sharing germs and spreading disease.

No provider can completely rid her child care home of germs or prevent the spread of infectious disease. However, with good personal hygiene, a clean and sanitary family child care home, and a sound health policy, she can reduce the spread of infectious diseases.

About This Chapter

The first part of this chapter gives additional information about infectious diseases and what you can do to prevent their spread in your child care home. The second part of this chapter focuses on foodborne illnesses and how they can be prevented.

If you do not understand something you read in this chapter, or would like more information, call your county or state health department.

If you find any differences between the recommendations we make and those made by your state licensing agency, follow the recommendations that are the most strict, as long as they do not violate your state's requirement. In most cases it is better to be too cautious than too lax.

PART 1.
Preventing the Spread of Infectious Disease

In this section you will learn about:

the basics of infectious disease | page 5
the proper way to wash your hands | page 7
developing your health policy | page 13

To learn more, read the supporting information on:

making your own bleach solution | page 9

There is also information on some special issues:

a handwashing song for children | page 8
how to change a diaper | page 11
cytomegalovirus (CMV) | page 17
tuberculosis | page 19
caring for children with HIV/AIDS | page 20

The Basics of Infectious Disease

PRIMARY INFORMATION

What Every Family Day Care Provider Should Know

Some diseases are spread easily by just a few germs on a hand or toy. Others are more difficult to spread. In order to understand the recommendations for preventing the spread of infectious disease, it is important to first understand the different ways diseases spread.

How Infectious Diseases Spread

Infectious diseases spread in one of three ways.

1. Through the air.

Some viruses and bacteria float in the air. In some cases they are spread through coughing or sneezing. In other cases, they are spread simply by being in the same room with an infected person and sharing breathing space. Examples of diseases spread through the air include the flu, colds, chicken pox, meningitis, and tuberculosis. (For more information on tuberculosis see page 19.)

2. From stool to hand to mouth.

Many disease, including infectious diarrhea and hepatitis A, are spread when children or adults touch feces from an infected person. For example, a toddler may put her hands in her diaper, and then put her fingers in another child's mouth. These germs can also spread by touching a contaminated object. For example, that same toddler may touch a toy or doorknob after touching her feces and contaminate it with the virus. Another toddler may then place the contaminated toy in her mouth or touch the contaminated doorknob and then place her hand in her mouth. Similarly, a provider might touch a changing table that was not sanitized properly, and then fix herself a sandwich without first washing her hands.

Infants and toddlers under three years of age are especially likely to spread infectious diarrhea and hepatitis B. They are at an age when everything seems to go in their mouths. In addition, children this age are in diapers. Diapering and cleaning up afterwards provides plenty of opportunities for spreading these diseases. This is why following the handwashing and diapering procedures outlined in this chapter are especially important.

3. Through direct contact.

Some diseases are spread when a person directly touches infected skin or secretions, or when a person touches an object that has been handled by an infected person and then touches his or her own eyes, mouth, or nose. Objects that are likely to become contaminated include combs, brushes, toys, clothing, towels, and furniture. Young children often become infected this way because they explore the world by touching and placing their mouths on things.

Illnesses spread through direct contact include colds, skin diseases like impetigo, conjunctivitis, and ringworm, infestations such as scabies and lice, and whole body illnesses such as cytomegalovirus, which is caused by contact with infected saliva or urine. (There is additional information on cytomegalovirus in the Special Issue block on page 17.)

Stopping the Spread of Infectious Disease

Now that you understand the way infectious diseases spread, you can see the importance of good personal hygiene and keeping a sanitary child care home. Following the recommendations below will help you control the spread of infectious disease in your child care home.

1. **Wash your hands and the children's hands with warm soapy water, thoroughly and often. Proper handwashing is the single most effective way to prevent the spread of disease in the family child care home.**

   You should wash your hands:
   - before children arrive for the day and
   - after you clean.

   The children should wash their hands :
   - when they arrive.

   You should all wash your hands:
   - before preparing or eating food
   - after diapering/toileting
   - after contact with body fluids (blood, mucous, vomit, feces, urine)
   - after coming in from outside play
   - after touching animals or their leashes, toys, or dishes.

2. **Clean and sanitize toys and surfaces and other areas children touch daily.** (More information on sanitizing and making your own sanitizing solution is provided on pages 9 and 10.)

3. **Follow correct procedure when changing a child's diaper.** (Detailed instructions for changing diapers are provided on page 11.)

4. **Keep diaper-changing tables and potty-training and toilet areas clean and sanitary and located away from food preparation and eating areas. Always store soiled diapers, wipes, and other contaminated trash in a covered, lined trash container. Empty trash daily or if needed, more often.** (A foot-pedal operated container lined with a plastic trash bag is recommended for soiled diapers.)

5. **Use your space wisely. Open space and good ventilation decrease the opportunity for germs to spread among children.** Consider these suggestions:

   - Do not concentrate toys and equipment in small areas.
   - Place cots/cribs at least 3 feet from each other and alternate foot to head so that the air circulates freely and the children do not breathe directly on each other.
   - Unless your family day care home is cooled and heated by central air, air out rooms every day to circulate fresh air, even in winter.

(Source: Family Child Care Health and Safety Checklist: A Packet For Family Child Care Providers, Abby Shapiro Kendrick and Joanne Gravell, Mass. Department of Public Health, Toys 'n Things Press.)

The Proper Way to Wash Your Hands

PRIMARY INFORMATION

What Every Family Day Care Provider Should Know

Our hands may look clean, but chances are they are covered with germs. They become contaminated by almost everything we touch. It is very important that we wash our hands often and in the proper manner. In fact, **studies show that proper handwashing could decrease the rate of diarrhea among children in child care by 1/2.**

Use the following handwashing procedure.

1. Wet hands with warm water.
2. Cover hands with liquid soap. (Germs can actually live in bar soap.)
3. Rub hands together, using a circular motion and some friction for 20 to 25 seconds. Be sure to rub the backs of your hands, your wrists, between your fingers and around your fingernails. A hand brush would be helpful for washing under nails.
4. Rinse hands well under running water, holding them so that water flows from the wrists down the fingers.
5. Dry your hands with a paper towel. (Germs can actually live on cloth towels.)
6. Turn the faucet off with the paper towel and throw the towel away into a lined, covered step can.

(Taken from Family Child Care Health and Safety Checklist: A packet for family child care providers, Abby Shapiro Kendrick and Joanne Gravell, Massachusetts Department of Public Health, Toys 'n Things Press, St. Paul, MN. Adapted from: Preschool Enrichment Team, Inc., Holyoke, Massachusetts.)

Proper handwashing is the single most important thing you can do to reduce illness in your family child care home.

A Handwashing Song For Children

Teach children the good habit of handwashing. Here is a song that will help.
(To be sung to the tune of "Row, Row, Row Your Boat.")

Wash, wash, wash your hands
Play your handy game.
Rub and scrub and scrub and rub,
Germs go down the drain.

This song was taken from the video "Healthy Child Care: Is It Really Magic?", 1988, Health Professionals in Child Care, InSight Productions, Bayshore Child Care Services.

Making Your Own Bleach Solutions

Supporting Information

For the Provider Who Wants To Know More

Sanitizing toys, equipment, and surfaces children touch is necessary to control the spread of infectious disease. If you use a commercial product designed for sanitizing, such as lysol, this can get expensive. As an alternative, consider making your own sanitizing solution using household bleach. A properly prepared spray bleach solution will kill germs within 5-10 seconds of contact.

To make sure your bleach solutions stay effective:

1. **Prepare a fresh chlorine bleach spray solution every day.**
2. **Label your spray bottles containing the bleach solution so that you know the strength of the solution.** (As you will soon read, different strength solutions are required for sanitizing different items in your day care home.)
3. **Always clean the surface or item, removing dirt, soil, food messes etc., before using the sanitizing solution.**
4. **Store the chlorine bleach in original containers away from heat or direct sunlight** (heat, light and "old" bleach will effect its strength.) **Store both bleach and bleach solutions out of children's reach.**

Here are formulas for 3 different strengths of bleach solution. The chart following the formulas will tell you which bleach solution is best for sanitizing different items in your day care home and how often these items or areas should be sanitized.

1. General Purpose Spray Bottle Solution
1/4 cup bleach to 1 gallon water
or
1 tablespoon bleach to 1 quart water
(For tabletops, toys, general sanitizing)

2. Diaper Area/Bathroom Spray Bottle Solution
1/2 cup bleach to 1 quart water
or
1 part bleach to 10 parts water
(For diaper areas, bathrooms, sick rooms, food preparation areas.)

3. Soaking Solution Sink/Bucket Solution
1 tablespoon bleach to 1 gallon water
mix in bucket or sink.
allow a 2 minute soak
air dry
(For dishes, toys children put in their mouths, color safe laundry.)

Using Bleach Solutions

How Often	Materials/Items to be Disinfected	Solution used
Daily	Hard surfaced or washable toys (toys children frequently put in their mouths.)	General Purpose or Soaking Solution
	Crib rails	General Purpose
	Bathroom door knobs	General Purpose
	Bathroom sinks, sink handles	General Purpose
	Toilets, flush handles	Diaper Area
	Sink/faucet handles	General Purpose
	All washable floors	General Purpose
	Water tables (if used that day)	General Purpose
Weekly	Cot frames (immediately if soiled), door knobs, light switches, shelves and other hard surfaces touched by children.	General Purpose
	Children' chairs	General Purpose
	Pet areas	General Purpose
Monthly	Cloth (washable) toys, dress-up clothes	Washed with detergent, rinsed and dried.
	Cots (immediately if soiled)	Washed with detergent, rinsed and dried.
Before Use	Food preparation areas*	General Purpose
	Food serving tables (eating tables)	General Purpose
After Each Use	Diapering area/surfaces	Diaper Area
	Food preparation areas*	General Purpose
	Food preparation tools, dishes, equipment and flatware	Soaking Solution
Immediately	Any surface that has been soiled with urine, stool, mucous, vomit, blood, or nasal discharge.	Diaper Area

* Food preparation areas should also be cleaned between foods. For example, if raw meat is cut on a cutting board, be sure to clean and disinfect the board before using it for chopping vegetables.

(Taken from: Country Kids Health Connection, 1989, Maricopa County Division of Public Health, Phoenix, AZ.)

Special Issue: How to Change a Diaper

Changing a child's diapers offers many opportunities for spreading infectious diseases. To control the spread of infectious diseases, follow these procedures when you change a child's diapers.

Step 1: Check to be sure the supplies you need are ready. Place a disposable paper on the diaper table. (Inexpensive materials such as wax paper, computer paper, grocery bags, or shelf paper can be used.)

Step 2: Lay the child on the diapering table. Never leave the child unattended. even though you think they are too young to roll over.

Step 3: Remove soiled diaper and any soiled clothing. Soiled diaper goes into a covered, plastic lined diaper pail or trash can. Soiled clothing and cloth diapers go into a labeled, plastic bag to be taken home.

Step 4: Clean child's bottom with a moist disposable wipe. Wipe from front to back using each wipe only once. Repeat with fresh wipes if necessary. Throw away disposable wipe and table paper into plastic lined diaper pail or trash can.

Step 5: Clean your hands with a disposable wipe. Throw away into plastic lined diaper pail.

Step 6: Diaper or dress the child. Now you can hold him or her close to you.

Step 7: Wash the child's hands with soap and water. Return the child to the group.

Step 8: Clean and disinfect the diaper area and all contaminated surfaces. Replace supplies. Wash your hands with soap and water.

(Adapted from: Preschool Enrichment Team, Inc., Holyoke, MA. Taken from Family Child Care Health and Safety Checklist: A packet for family child care providers. Abby Shapiro Kendrick and Joanne Gravell, MA. Department of Public Health, Toys 'n Things Press, St. Paul MN.)

Special Issue: Basic, Medium and Deluxe Diapering?!

Basic: Follow the instructions on page 11. Talk to the baby. Do not rush, but do not take much extra time either.

Medium: Follow the instructions on page 11, but go at a slower pace. Talk to the baby and give the baby a toy to play with.

Deluxe: As usual, follow the direction on page 11. However, since this is the deluxe diaper change, take extra time. Use a warm cloth and a cool cloth and talk to the baby about the differences in temperatures. Play a sound game with the baby. Use soundmakers like bells that you have near the changing table or just make your own sounds. Use a flashlight to play light games with the baby. Make diaper changing fun.

Developing Your Health Policy

PRIMARY INFORMATION

What Every Family Child Care Provider Should Know

Every family child care home should have a written health policy. This policy should be specific about when or under what circumstances an ill child should be removed from the child care home, and when or under what circumstances the child can safely return without the risk of infecting others. In developing your health policy, ask yourself the following questions:

1. **What are the needs of the sick child? Can I satisfy those needs while still fulfilling my usual duties with the other children in the home?**

2. **Can the other children catch the disease? How do I best protect the other children in my home from becoming ill?**

3. **Does my health policy satisfy state and local health regulations?**

A written health policy not only gives you a set of guidelines to follow, but it also helps you to communicate with parents about actions you may take to protect the children in your care from the spread of infectious disease. There may be times when you have to ask a parent to keep a child at home or to temporarily make other care arrangements. A written policy can serve to caution parents of this possibility and encourage them to be prepared with an alternative plan.

A written health policy also lets parents know that you are doing your part to prevent the spread of disease in your home and protect the health of their child. It also educates parents about health issues and helps them to understand the seriousness of some illnesses and the measures they need to take to protect themselves and their families.

Use the guidelines on the following page in developing a health policy for your child care home. These health policy guidelines were developed by the American Red Cross, American Academy of Pediatrics and the National Academy of Sciences. The information was taken from the health and safety units of the American Red Cross Child Care training manual.

Each state issues its own guidelines for when a child should be taken out of child care and when that child can return. In all cases, make sure you comply with your state guidelines and that your health policy meets your state's requirements.

Health Policy Guidelines

From the American Red Cross, American Academy of Pediatrics and the National Academy of Sciences.

Very few illnesses make it necessary to keep a child at home. If the child has already exposed others to the infection and is being treated, the disease usually cannot be passed. However, children with certain diseases should stay home. These include:

Chicken pox (varicella): The child should stay home for 6 days if the child has not been in contact with the other children in the group in the day or 2 before the rash appeared; if the child is too ill to participate; or if the child needs more care than the caregiver can provide. In general, keeping the child with chicken pox at home will not stop its spread if the other children already were exposed to the child one day before the rash developed.

Hepatitis A: The child should stay home until all those who should be protected have received gamma globulin shots.

Impetigo: The child should stay home until treatment starts.

Infectious conjunctivitis (pink eye): The child should stay home until the day after treatment begins.

Infectious diarrhea: The child should stay home until the diarrhea stays in the diapers or the child can get to the toilet; or until a health provider says the child can return.

Lice: The child should stay home until the day after treatment starts.

Ringworm: The child should stay home until treated for 24 hours, but need not be sent home if the sore can be covered.

Scabies: The child should stay home until treatment starts.

Strep throat, scarlet fever: The child should stay home until the day after treatment with antibiotics.

Vaccine-preventable diseases (Diseases prevented by immunizations): The child should stay home until a health provider says the child may return to the child care setting.

Symptoms That Indicate A Child Should Stay Home

When a child has certain symptoms, he or she should stay home or be cared for in a special care setting. The child may return when a physician has said that the child does not put the other children at risk of getting ill and the child is well enough to participate in activities. These symptoms include the following:

- **A fever and the child is feeling or acting ill.**

  Fever is a sign that the body is fighting some problem. Fever is not a disease. The importance of a child having a fever depends on what is causing the fever and how the child is behaving. For example, if nothing else is wrong and the child had a diphtheria-tetanus-pertussis (DPT) shot the day before, or had a measles-mumps-rubella (MMR) shot 7 to 10 days before, **fever alone does not mean that the child should stay home.**

  There are certain times when a fever means a child should stay home. These include those times when:

  - An infant under 4 months of age has an underarm temperature of 100 degrees Fahrenheit or higher or a rectal temperature of 101 degrees Fahrenheit or higher. Get medical help immediately.
  - A child between the ages of 4 months and 24 months has a rectal temperature of 102 degrees Fahrenheit or higher or an underarm temperature of 101 degrees Fahrenheit or higher.
  - A child over 24 months has an oral temperature or underarm temperature of 102 degrees or higher.

- **Vomiting or upset stomach.**
  - A child with repeated vomiting can easily spread germs through the vomit. The child will also need a caregiver's attention. Unless you can provide the child with one-to-one attention, a child who vomits repeatedly should be sent home.
  - If the child vomits only once and has no other symptoms, the child probably does not have to go home immediately. Some children vomit in the morning when they have swallowed mucous the night before.
  - If the child is vomiting and also has other symptoms such as abdominal pain, diarrhea, and significant behavior changes, the child should stay home.

- **Looser and more frequent stools than usual (diarrhea):**
  - When a child has a single loose stool, he or she does not need to be at home. However, if the child has very runny stools that cannot be contained in a diaper, or the child can not reach the toilet in time, the stool may contaminate the child care home.

  - Sometimes children get diarrhea when they take antibiotics. The children feel and act perfectly well and may not require extra caregiver attention.
  - Children may also eat something (for example prunes, too many strawberries, or melon) that causes loose stools. If they feel well, do not need extra caregiver attention, and are able to participate fully in the child care program activities, they do not have to stay home.
  - Children with diarrhea who look or feel sick, or have a fever with their diarrhea, need close attention, need help washing up, or need added fluid intake, should stay home unless the caregiver can pay close attention to them.

- **Runny Nose**
  - Children with constant runny noses that are not caused by allergies may spread germs everywhere. They may wipe their noses with their hands, then rub them on their own and other people's clothing and on other surfaces.
  - Remove secretions from children's noses with facial tissues. You may also use a suction bulb for infants and younger children. This will help prevent the secretions from backing up into the child's ears or sinuses, where they can cause secondary bacterial infection.

- **Pain**
  - When a child is in pain, the child needs a parent's attention. The parent must take care of whatever is causing the pain and must comfort the child.

- **Too sick to fully participate**
  - Caregivers care for more then one child. When one child cannot participate, the caregiver must care for both the ill child and the other children. Unless the caregiver can provide sick-child care, the child should be cared for elsewhere.

(Source: Taken from American Red Cross Child Care Course: Health and Safety Units, American Red Cross, 1990)

Special Issue: Cytomegalovirus (CMV): A Virus That Could Threaten the Health of Your Unborn Child

CMV is a common virus that is harmless to most people. It is typical for a person to come into contact with the virus, develop an infection, and have no problems or symptoms. In fact, most adults and children live with the virus without even knowing they have it. However, there are three groups for whom CMV infection can have very serious health effects. These are:

1. The unborn children of women who catch CMV for the first time during pregnancy.
2. Persons whose natural immunity is weakened because they receive certain drugs or medical treatments such as chemotherapy or organ transplants.
3. Persons with an immune deficiency disease such as AIDS.

Research shows that there is a higher proportion of CMV infection among child care workers and others who work with children as compared to the general public. This is because CMV is common among children and spreads rapidly in environments where many children are together. Once children are toddling, placing toys in their mouths, exchanging toys, and in close contact with other kids, as many as 80% may become infected.

CMV is spread through contact with bodily fluids including saliva, feces, urine, semen, and other secretions. A child care worker has many opportunities to become exposed to CMV. Exposure could occur while changing diapers or through contact with a child's saliva. CMV poses no health threat to the children or to the child care worker herself. **However, if that child care worker is pregnant, CMV does place the health of the unborn child at risk.**

Women who are pregnant and become infected with CMV for the first time may give CMV to their unborn children. This is called "congenital CMV disease." Some infants infected this way never have symptoms or complications. Others may develop symptoms including mental retardation, hearing loss, pneumonia, bleeding problems, infections of the liver and spleen, and smaller-than-normal head size. **About 4,000 children born each year in the United States are mentally retarded and/or physically disabled as a result of CMV infection. In fact, CMV is as common a cause of birth defects as the more widely known Down's Syndrome.**

If you are caring for children, or are the mother of a child who is in a child care setting with other children, and you are pregnant or could become pregnant, take precautions. The Centers for Disease Control (CDC) recommends that you wash your hands often with soap and water and limit your contact with body fluids such as urine, feces, and saliva. There is no vaccine for CMV available for general use at the present time. But by following these basic hygiene practices, you can limit your risk of infection and therefore the chance that you might pass CMV to your unborn child.

For more information about CMV, contact your state or county health department, the Centers For Disease Control and Prevention's automated information line at 1-404-332-4555, ext 236., or Retarded Citizens/Atlanta, 404-321-0877.

Special Issue: Tuberculosis

Tuberculosis (TB) is an infection of the lungs caused by the bacteria Mycobacterium tuberculosis. TB is transmitted when an infected person coughs the bacteria into the air and another person inhales the bacteria. In most cases TB is not highly contagious. It usually takes prolonged exposure to the air containing the bacteria to cause infection.

For many years the number of reported tuberculosis cases declined. TB was thought of as a disease of the past. Now tuberculosis is on the rise again. And the development of some drug resistant strains is making tuberculosis even more dangerous and difficult to treat than before.

Children ages 0 to 4 are at the highest risk of developing active TB when exposed to the bacteria. TB can be very serious for children. Without proper treatment TB can cause Meningitis and neurological disorders and can result in permanent disabilities or even death. It is estimated that one case of childhood TB could cost approximately $200,000 to treat.

TB is most often transmitted to a child by a parent or other adult living in the home. In the family situation there is both prolonged exposure and a sharing of breathing space. These same factors are present in the family child care setting. In fact, there have been cases of transmission of TB from adults to children in family child care. **Only adults can spread TB to others. TB is not transmitted by children to other children or by children to adults. Children do not have enough force behind their coughs to put the TB bacteria in the air.**

Some states, such as New York, California, and Florida, require family child care providers and others who work in child care to be tested for TB prior to employment. Because of the rise in TB cases, other states are also considering such a requirement. **The National Association for the Education of Young Children, the American Academy of Pediatrics, and the American Public Health Association recommends that you and other adults living in your home be tested for TB, even if your state does not require it. Early detection of TB not only protects the children in your care, but also insures early treatment to anyone in your home who has active TB.**

TB tests are simple, quick, painless and inexpensive. Some states provide TB tests free through county health departments. Call your local health department for information on TB testing in your area.

(Source: Healthy Young Children: A Manual For Programs. Kendrick, Kaufmann, Messenger (Eds.), National Association for the Education of Young Children, Washington, D.C.)

Special Issue: Caring for Children with HIV or AIDS

Many providers have expressed concern about caring for children with HIV/AIDS. What follows are some questions about HIV/AIDS providers frequently ask and the answers to those questions. If you don't find the answers to your questions here, call your local HIV or AIDS information line or call the National AIDS Hotline at 1-800-342-2437.

What is the risk for HIV/AIDS in child care?

HIV, the virus that causes AIDS, is not easily spread. To date there is no evidence that it has been spread through normal contact in child care settings. The virus is not spread through contact with saliva, nasal secretions, mucus, tears, vomit, urine or stool. There are no documented cases of transmission of the virus from wiping a runny nose or changing a diaper.

The only possibility of the spread of HIV in the child care setting is through accidental blood exposure. Still the risk is very small. Even if a provider comes into contact with infected blood while tending to a child's scrape or cut, or comes in contact with a bloody stool, their risk of infection is almost zero. To become infected, the blood of the infected child would have to get into the blood stream of the provider. This requires blood to blood contact.

Can HIV be spread through biting?

There has never been a case where the virus has been spread by biting. Even in documented cases where a child with HIV/AIDS has bitten another child or an adult and bleeding has resulted, the virus was not transmitted. Similarly, it is very unlikely that an uninfected child can get the virus by biting an infected child. The only way HIV could be spread through biting is if blood is exchanged. The only way this could happen is if the child who is biting has an open, bleeding sore in his or her mouth and infected blood passes from the bite to the sore or from the sore to the bite.

Can providers get HIV by handling an infected mother's breastmilk?

Breastmilk can contain the virus, but there is a very small risk of transmission to the provider. To reduce your risk even more, limit your exposure to breastmilk. Suggest that moms bring breastmilk in bottles and wash your hands before and after feeding.

What if there is an injury on the playground and a child is bleeding? What should I do?

The risk of infection from tending to an injured child is extremely slight. Their blood would have to enter your blood stream through a open bleeding sore or cut that you have. To minimize risk, have latex or vinyl gloves handy and put them on when tending to an injured child who is bleeding. However, the American Academy of Pediatrics stresses that you not delay urgent care of a bleeding child if gloves are not available. The risk of transmission you face is simply to slim to warrant it.

How can I know if I am caring for a child who has HIV?

You may not always know when you are caring for a child with HIV. A child with HIV can appear healthy and normal. For this reason you should always protect yourself by following the universal precautions outlined below. These precautions will prevent the spread of HIV and all other communicable diseases.

What should I do to minimize the risk of transmission in my family child care home?

You should always follow universal precautions. These practices will prevent the spread of all communicable diseases, from colds to HIV. Use these practices will all children at all times.

1. Minimize contact with blood and body fluids, especially skin lesions and stool.
2. Keep all skin wounds and lesions covered with a clean bandage that does not allow blood or other body fluids to pass through.
3. Do not share personal items such as pacifiers, toothbrushes, or razors. All items that are washed between uses, like eating utensils, linens , etc. may be shared.
4. Handwashing is the best prevention against the spread of all infections from the common cold to HIV. Refer back to page 7 in this chapter for more information on proper handwashing procedures.
5. Latex or vinyl gloves should be used for all contact with blood, bloody stool, wounds, or oozing skin rashes. Keep them with you when children are playing outside in case a child is injured and bleeding and needs immediate attention.
6. Clean all soiled surfaces with disposable paper towels and disinfect with a bleach and water solution. Page 9 of this chapter provides instructions for making your own sanitizing solution using household bleach and water.
7. Dispose of all contaminated items, like paper towels, diapers, gloves and wound dressings, in a covered trash can lined with a disposable plastic bag.
8. Soiled clothes and linens should be placed in a covered container lined with a disposable plastic bag. They should be washed as soon as possible in hot water with soap and bleach, separate from other laundry.

Can I refuse to care for a child infected with the virus?

No. Children with HIV are protected under the Americans With Disabilities Act. For more information about caring for children with HIV/AIDS or other special needs, call the Action for Better Child Care at 404-634-7110.

Is a child with HIV/AIDS likely to die in my care?

No. HIV, the virus that causes AIDS, makes an infected person sick by weakening their immune system. Eventually the immune system is so weak that the child becomes susceptible to many illnesses that an uninfected child could easily fight off. It is extremely unlikely that you would be asked to care for a child with such a weakened immune system. Being around other children, and being exposes to the illnesses they might carry, is too risky for the child with HIV. By the time a child has developed AIDS and may be near death, they would not be in your care.

PART II.
Preventing Foodborne Illnesses

In this section you will learn about:

the basics of foodborne illness | page 25
controlling bacteria with heat and cold | page 27
food spoilage and mold | page 33
foodborne parasites: trichinosis and toxoplasmosis | page 35
shopping wisely | page 37
storing foods safely | page 39
preparing foods safely | page 45
cooking foods safely | page 47
serving foods safely | page 49
using leftovers safely | page 51

To learn more, read the supporting information:

more about the bacteria that causes foodborne illness | page 29
cold storage | page 41
safe microwaving | page 48
special care for special foods | page 52

A Word of Caution

In chapter 4 you were encouraged to let the children help you prepare snacks and meals. Don't let the warnings about foodborne illnesses discourage you. Instead, when you review the information on foodborne illnesses and how to prevent them, remember that you will need to pass this information along to your young helpers. Teaching children how to prevent foodborne illness, like teaching them about foods and nutrition, is all part of the health education you can provide to the children in your care.

The Basics of Foodborne Illness

PRIMARY INFORMATION

What Every Family Day Care Provider Should Know

Foodborne illnesses are much more common than most people believe. The most common symptoms of foodborne illnesses are upset stomachs, abdominal pains, diarrhea, and sometimes headaches. Estimates are that as many as 2 million cases of foodborne illness a year are mistaken for the flu or a 24 hour stomach virus. But not all foodborne illnesses come and go so quickly. Some are much more serious and in extreme cases can be fatal. **Foodborne illnesses can be particularly serious for certain groups of people including infants and children, pregnant women, and the elderly.**

There are two major kinds of foodborne illnesses. Both are caused by microorganisms or bacteria and produce similar symptoms. These are:

1. Food Poisoning

Food poisoning is caused by eating foods contaminated with poison or toxins produced by the microorganisms. The microorganisms themselves are killed in the cooking, but the poison that remains makes us ill.

2. Food Infection

Food infection is caused by ingesting the microorganisms themselves. Once eaten these live bacteria continue to live and grow in our bodies.

There are 4 common sources of foodborne illnesses. These are salmonella, clostridium perfringens, staphylococcus (known as staph) and clostridium botulinum, the toxin that causes botulism. (For more information about these sources of foodborne illness, see the Supporting Information on page 29.)

With proper food handling, you can prevent these microorganisms from causing illness in your family day care home. This includes taking care to purchase safe foods, storing them properly and preparing and serving them safely.

(From: Preventing Foodborne Illness: A Guide to Safe Food Handling, Home and Garden Bulletin #247, September 1990, United States Department of Agriculture, Food Safety and Inspection Service.)

The Meat and Poultry Hotline
1-800-535-4555

If you have a question about the proper handling of meat and poultry, how to tell if it's safe to eat, and how to better understand meat and poultry labels, call the meat and poultry hotline at 1-800-535-4555. If you live in the Washington, D.C. metropolitan area, call 447-3333. Hotline hours are from 10am until 4pm Eastern time.

Controlling Bacteria With Heat and Cold

PRIMARY INFORMATION

What Every Family Child Care Provider Should Know

Since bacteria grows best in moist, warm conditions, it is no surprise that we find bacteria in our food. **Temperature and time are the major factors that influence the growth of bacteria.**

Most foodborne illness is caused by bacteria that multiply rapidly at temperatures between 60 and 125 degrees Fahrenheit. The longer foods are left at this temperature, the greater the opportunity for the growth of bacteria.

**Keep hot foods hot
and
cold foods cold.**

To control the growth of bacteria that may already be present in food, it is important to maintain the internal temperature of cooked foods that will be served hot at 140 degrees or hotter.

The internal temperature of foods that will be served cold should be kept at 40 degrees or below.

Here are some additional hints about controlling bacteria with heat and cold.

- **When foods are boiled, baked, roasted, or fried, they reach temperatures from 160 to 212 degrees Fahrenheit. This kills most bacteria that can cause foodborne illness.**

- **Prompt refrigeration at 40 degrees Fahrenheit or below in containers that are less than 2 inches deep inhibits the growth of most, but not all, of these bacteria.**

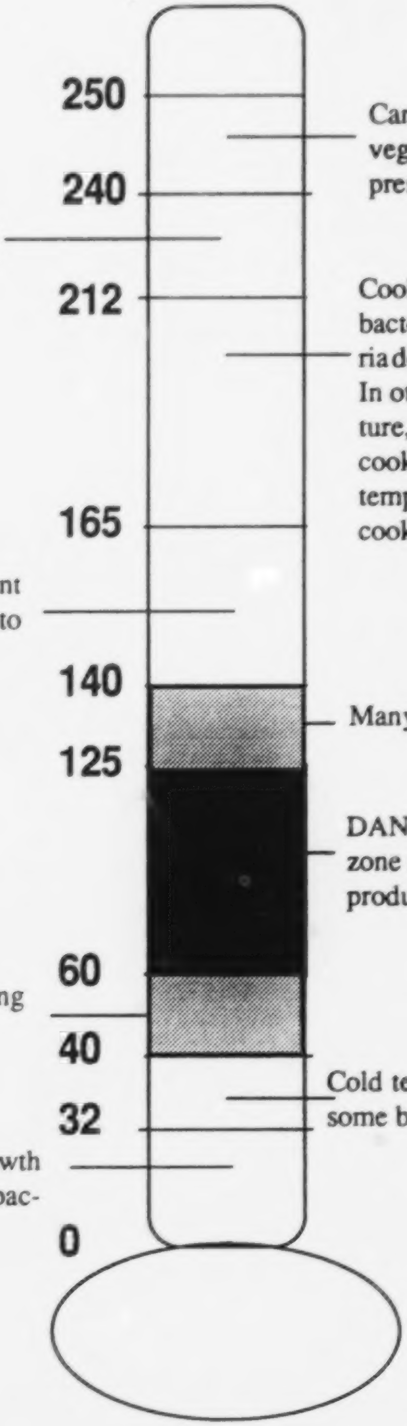
- **Freezing foods at 0 degrees Fahrenheit or below essentially stops bacteria from multiplying. However, freezing will not kill bacteria that are already present in food. In order to kill these bacteria, food must be reheated thoroughly to an internal temperature of 165 degrees Fahrenheit or above.**

- **Even with reheating, foods that have been improperly stored or otherwise mishandled cannot be made safe. Reheating cannot eliminate dangerous toxins produced by some bacteria. These foods should be thrown away.**

Consult the thermometer chart on the following page for more information on controlling bacteria with heat and cold.

(From: Preventing Foodborne Illness: A Guide to Safe Food Handling, Home and Garden Bulletin #247, September 1990, United States Department of Agriculture, Food Safety and Inspection Service.)

Temperatures for the Control of Bacteria



Canning temperatures for low acid vegetables, meat and poultry in pressure canner.

Canning temperatures for fruits, tomatoes, and pickles in water-bath canner.

Cooking temperatures that destroy most bacteria. The time required to kill bacteria decreases as temperature is increased. In other words, the higher the temperature, the less time the food must be cooked to kill the bacteria. The lower the temperature, the longer the food must be cooked to kill the bacteria.

Warming temperatures prevent growth but allow some bacteria to survive.

Many bacteria survive; some may grow.

DANGER ZONE. Temperatures in this zone allow rapid growth of bacteria and production of toxins by some bacteria.

Some growth of food poisoning bacteria may occur.

Cold temperatures permit slow growth of some bacteria that cause spoilage.

Freezing temperatures stop growth of bacteria but may allow most bacteria to survive.

More About the Bacteria That Cause Foodborne Illnesses

Supporting Information

For the Provider Who Wants To Know More

Here is some additional information about the 4 major bacterias that cause foodborne illnesses and how you can protect the children in your child care home.

Salmonella

Sources:

Salmonella bacteria are often found in raw meats, poultry, eggs, milk, fish, and products made from them. They may spread to other foods through cross-contamination. Cross-contamination takes place when a contaminated food comes in contact with and spreads the bacteria to a previously uncontaminated food. For example, let's suppose you were shopping for groceries and you loaded your cart in such a way that the juices from meats dripped on your apples. This allows cross-contamination. The salmonella bacteria is allowed to spread from the meat to the apple. In addition, because you do not plan to cook the apple the salmonella bacteria will not be killed by heat. Salmonella can not be detected by taste or odor of food. You could ingest or serve contaminated foods without knowing it.

Disease

About 40,000 cases of salmonellosis are reported each year. Salmonella bacteria can live and grow in anyone's digestive tract once contaminated food is eaten. Symptoms of infection occur within 12 to 36 hours after eating. They include severe headache, vomiting, diarrhea, stomach cramps, fever and chills. Illness usually appears 6 to 48 hours after eating and lasts from two to seven days. Infants and young children , the ill, and the elderly may be seriously affected. Illness is rarely fatal except among infants or elderly persons whose resistance to illness is low.

Prevention

Heat destroys the salmonella bacteria. Thoroughly cook all meat, poultry, fish and eggs. Warm leftovers thoroughly. Bring broths and gravies to a full boil. Do not drink unpasteurized milk. Avoid contaminating cooked foods with juices from raw foods. Avoid cross contamination by immediately cleaning surfaces and equipment, (including your hands), that have touched raw or possibly contaminated foods before they have a chance to contaminate other foods, surfaces or equipment.

Staphylococcus aureus (Staph)

Sources:

Staph bacteria are found on our skin, in infected cuts and pimples, and in our noses and throats. They are spread by improper food handling. Staph can multiply rapidly at warm temperatures to produce a toxin that causes illness. Staph bacteria prefer cooked food high in protein. They also grow well in foods high in sugar or salt, which inhibits the growth of more sensitive microorganisms.

Disease:

Symptoms of staph intoxication include nausea, vomiting, and diarrhea that usually appear 30 minutes to 8 hours after eating and may last a day or two. The illness is usually not serious in healthy people.

Prevention

Wash hands and utensils before preparing and serving food. Refrigerate, in shallow, covered containers, cooked foods that will not be served immediately. Don't let prepared foods- particularly cooked and cured meats and cheese and meat salads- sit at room temperature more than 2 hours. Thorough cooking destroys staph bacteria, but staph toxin is resistant to heat, refrigeration and freezing. Therefore, **once staph has been allowed to contaminate a food and create the toxins, the food can not be made safe to eat. Contaminated food should not be eaten.**

Clostridium perfringens

Source

Clostridium bacteria are more widespread over the earth than any other disease-causing organism. They are present in the soil, in the intestines of humans and animals, and in sewage. Clostridium perfringens bacteria is called the "cafeteria germ" because it often strikes food served in quantity and left for long periods on a steam table or at room temperature. Clostridium bacteria can be present as a vegetative cell or a spore. The vegetative cells produce the toxins that cause illness. Thorough cooking will kill the vegetative cells, but will not kill the spores. At temperatures between 70 and 120 degrees, the spores can become vegetative and produce the toxin.

Disease

Symptoms of Clostridium perfringens enteritis include diarrhea and gas pains that appear within 9 to 15 hours and last about 1 day. Elderly people and ulcer patients can be affected more seriously.

Prevention

Divide large portions of cooked foods such as beef, turkey, gravy, dressing, stews, and casseroles into smaller portions for serving and cooling. Keep cooked foods hot (at an internal temperature of 140 degrees or above) or cold (at 40 degrees or below). Reheat leftovers thoroughly (to an internal temperature of at least 165 degrees) before serving and bring leftover gravy to a rolling boil. Keep cold sliced meats and cold cuts below 40 degrees and serve them cold.

Clostridium Botulinum

Source

Clostridium botulinum bacteria are present in the soil and water. Like clostridium, it may be present as a vegetative cell or as a spore. The vegetative cells produce the toxin that causes illness. While thorough cooking will kill the vegetative cells, some of the spores may survive. At temperatures above 38 degrees the spores can become vegetative and produce the toxin. The risk of botulism has long been associated with canned foods that are not processed to a high enough temperature to kill all of the spores. More recently, it has been associated with cooked foods held at room or warm temperature for an extended time under conditions where oxygen is limited- mounded cooked onions in butter, potatoes wrapped tightly in foil, meat pies and vacuum packed foods.

Disease

Botulism toxin affects the nervous system and can be fatal if not treated. Symptoms appear 12 to 48 hours after eating and include double vision, droopy eyelids, trouble speaking and swallowing, and difficult breathing. Without treatment, a person can die of suffocation because the nerves no longer stimulate breathing.

There are antitoxins, which have reduced the number of deaths from botulism, but persons may suffer nerve damage, and recovery is often slow.

Prevention

Divide large portions of cooked foods into smaller portions for serving and cooling. Keep cooked foods hot (at an internal temperature of 140 degrees or above) or cold (at 40 degrees or below). Reheat leftovers thoroughly (to an internal temperature of at least 165 degrees) before serving. Outbreaks of botulism are rarely associated with commercially canned products. Home canners should follow established guidelines for canning. Do not taste food from leaking, bulging, or damaged cans; from cracked jars or jars with loose or bulging lids; from containers that spurt liquid when opened; or any canned food that has an abnormal odor or appearance.

(From: Preventing Foodborne Illness: A Guide to Safe Food Handling, Home and Garden Bulletin #247, September 1990, United States Department of Agriculture, Food Safety and Inspection Service.)

Food Spoilage and Mold

PRIMARY INFORMATION

What Every Family Child Care Provider Should Know

Spoilage

When foods have not been stored properly, or have simply been kept too long, you begin to see signs of deterioration caused by microorganisms. This is referred to as food spoilage. In general, it is best to throw away any food that has begun to spoil and that has an uncharacteristic color, odor, texture or flavor. For more information about how long foods can safely be stored, see the primary information on page 39.

Mold

Mold does not necessarily mean that you have to throw away a food item. The density of a food effects whether or not the entire item has been contaminated. If there is only a small area of mold on a piece of hard block cheese, hard salami, or a dry cured country ham, the food can be salvaged. Cut out an inch of the product surrounding and below the moldy area. Keep the knife out of the mold itself and re-cover the food in fresh wrap. Any other visibly moldy foods-soft cheeses, sour cream, hotdogs, lunch meats, baked chicken, soft fruits and vegetables, bread, cake, flour, rice, peanut butter, etc.--should be thrown away. To avoid spreading the mold spores, gently wrap the food or place it in a bag before discarding. Be sure to examine other items that the moldy food may have contacted. Clean the refrigerator or container that held the item as necessary.

(From: Preventing Foodborne Illness: A Guide to Safe Food Handling, Home and Garden Bulletin #247, September 1990, United States Department of Agriculture, Food Safety and Inspection Service.)

Foodborne Parasites: Trichinosis and Toxoplasmosis

PRIMARY INFORMATION

What Every Family Child Care Provider Should Know

Parasites are organisms that depend on nutrients from a living host to complete their life cycle. There are several parasites that can infect humans through the food chain. **The two most common illnesses that result from eating food contaminated with parasites are trichinosis and toxoplasmosis.**

Trichinosis

Humans may contract trichinosis, caused by Trichinella spiralis, by eating undercooked pork or game that is infested with trichina larvae. Much progress has been made in reducing trichinosis in grain fed hogs and human cases are on the decline. Thorough home cooking will destroy any live trichina larvae that may be present in pork or other meat. Other proven trichina destruction methods used by industry under carefully controlled conditions- include curing, pickling, freezing, and cooking and canning.

Toxoplasmosis

Toxoplasmosis, caused by Toxoplasmosa gondii, is a common parasite infection in cats that can be transferred directly to humans through cat feces, or indirectly through improperly cooked meat or poultry. It is a particular risk for pregnant women. The consequences of infection are most severe for the infant who acquires the parasite from an infected mother before birth.

To prevent infection, cook meat, particularly lamb and pork, thoroughly. Keep the cat litter box away from the food preparation and cooking areas and out of the reach of children. If you have a sand box outside where children play, keep it covered when children are not using it. Cats, including those that do not belong to you, may see the children's sand box as an especially roomy litter box. Pregnant women should limit their exposure to cats that may be infected, wash their hands after handling cats, and have someone else change the cat litter box.

(From: Preventing Foodborne Illness: A Guide to Safe Food Handling, Home and Garden Bulletin #247, September 1990, United States Department of Agriculture, Food Safety and Inspection Service.)

Shopping Wisely

PRIMARY INFORMATION

What Every Family Day Care Provider Should Know

Your role in preventing foodborne illnesses actually begins with purchasing safe foods and keeping frozen and refrigerated foods safe until you can get them home and in the freezer or refrigerator. Here are some suggestions that will help.

- **When you're out, grocery shop last.** Take food straight home to the refrigerator. **Never leave food in a hot car.**

- **Don't buy food in damaged containers.** They are not a good bargain. Cans or glass jars with dents, cracks or bulging lids could be a sign that the food is contaminated or spoiled.

- **Buy food from reputable dealers with known records of safe food handling.**

- **Buy dated products only if the "sell by" or "use by" date has not expired and if you plan to use them before the use-by date.** Keep in mind that these dates are reliable only if the food has been kept at the proper temperature during storage and handling.

- **Buy products labeled "keep refrigerated" only if they are stored in a refrigerated case and are cold to the touch.**

- **Buy frozen products only if they are frozen solid.**

- **Do not buy packaged precooked foods with torn or damaged packages.**

- **Always place individual packages of raw meat and poultry in plastic bags before placing them in your shopping cart and grocery bag with other foods.** The juices that drip from the meats could contaminate other food products, especially foods that will be eaten without further cooking. **Always position packages of raw meat and poultry so that if juices do leak, they will not drip on other food products.**

- **Shop for perishables last. Keep refrigerated and frozen items together so that they will remain cold. Place perishables in the coolest part of your car during the trip home. Pack them in an ice chest if time from the store to home will be more than 1 hour.**

(From: Preventing Foodborne Illness: A Guide to Safe Food Handling, Home and Garden Bulletin #247, September 1990, United States Department of Agriculture, Food Safety and Inspection Service.)

Storing Foods Safely

PRIMARY INFORMATION

What Every Family Day Care Provider Should Know

After you have purchased safe foods, your next challenge is to store them properly and keep them safe until they are cooked and eaten. The following recommendations will help you.

- Check the temperature of your refrigerator with an appliance thermometer you can buy at a hardware or variety store. To keep bacteria in check, **the refrigerator should run at 40 degrees Fahrenheit and the freezer at 0 degrees Fahrenheit.** Generally keep your refrigerator as cold as possible without freezing your milk or lettuce.

- **Make sure raw meat and poultry are wrapped securely so that they do not leak and contaminate other foods.** Leave the product in the store wrap unless it is torn.

- **Put packages of raw meat, poultry or fish on a plate before refrigerating so their juices won't drip on other food.** Raw juices often contain bacteria.

- **Freeze fresh meat, poultry, or fish immediately if you can't use it within a few days.** If you plan to store it in the freezer for more than a couple of months, use freezer wrap, freezer-quality bags, or aluminum foil over commercial wrap so that the product stays fresher.

- **Keep eggs in the carton in which they came and store them on an inside shelf of the refrigerator. Do not use the egg trays that come mounted on the doors of some refrigerators.** Repeated opening and closing of the door causes temperature fluctuations and can result in breakage. In addition, the egg cartons eggs come in protect eggs from picking up odors and flavors of other foods in your refrigerator and helps prevent the loss of carbon dioxide and moisture from the eggs-- a particularly important factor if you have a frost-free refrigerator. Store eggs with the large end up to keep the yolk centered.

- **Keep canned goods and dry goods like dry beans and flour in a cool, dry place. Use them within 12 to 18 months.**

(From: Preventing Foodborne Illness: A Guide to Safe Food Handling, Home and Garden Bulletin #247, September 1990, United States Department of Agriculture, Food Safety and Inspection Service.)

Cold Storage

Supporting Information

For the Provider Who Wants to Know More

We know that refrigerated foods will not keep forever, and that even foods kept in the freezer eventually begin to loose quality. But exactly how long is too long?

Use the cold storage chart on the following pages to help you determine the time limits for keeping refrigerated and frozen foods. Foods refrigerated longer than the time limit provided in the chart may be spoiled or dangerous to eat. Throw these foods out. Frozen foods are safe to eat even if kept frozen longer than the time limit given in the chart. In the case of frozen foods, the time limits refer to the amount of time foods can be frozen and maintain their flavor and texture.

(From: Preventing Foodborne Illness: A Guide to Safe Food Handling, Home and Garden Bulletin #247, September 1990, United States Department of Agriculture, Food Safety and Inspection Service.)

Cold Storage Chart

These short but safe time limits will help keep refrigerated food from spoiling or becoming dangerous to eat. The time limits given for frozen foods are to maintain flavor and texture. It is still safe to eat frozen foods that have been kept longer.

Product	Refrigerator	Freezer
Eggs		
Fresh, in shell	3 weeks	don't freeze
Raw yolks, whites	2-4 days	1 year
Hardcooked	1 week	don't freeze well
Liquid pasteurized eggs or egg substitutes		
opened	3 days	don't freeze
unopened	10 days	1 year
Mayonnaise, commercial		
Refrigerate after opening	2 months	don't freeze
TV Dinners, Frozen Casseroles		
Keep frozen until ready to serve	3-4 months	
Deli and Vacuum-Packed Products		
Store-prepared (or homemade) egg, chicken, tuna, ham, macaroni salads	3-5 days	don't freeze well
Pre-stuffed pork and lamb chops, chicken breasts stuffed with dressing	1 day	
Store-cooked convenience foods	1-2 days	If you are going to freeze these foods, do so as soon as you get them home, not after they've sat in the refrigerator.
commercial brand vacuum-packed dinners with USDA seal	2 weeks, unopened	
Soups and Stews		
Vegetable or meat added	3-4 days	2-3 months
Hamburger, Ground and Stew Meats		
Hamburger and Stew Meats	1-2 days	3-4 months
Ground turkey, veal, pork, lamb and mixtures of them	1-2 days	3-4 months

Cold Storage Chart Continued

Product	Refrigerator	Freezer
Hotdogs and Lunch Meats		
Hotdogs, opened package	1 week	In freezer wrap 1-2 months.
unopened package	2 weeks*	
Lunch Meats, opened	3-5 days	In freezer wrap 1-2 months.
unopened	2 weeks*	
Bacon and Sausage		
Bacon	7 days	1 month
Sausage, raw, from pork, beef, turkey	1-2 days	1-2 months
Smoked breakfast links, patties	7 days	1-2 months
Hard Sausage-pepperoni, jerky sticks	2-3 weeks	1-2 months
Ham, corned beef		
Corned beef (In pouch with pickling juices drained, wrapped.)	5-7 days	1 month
Ham, canned label says "keep refrigerated"	6-9 months	don't freeze
Ham, fully cooked- whole	7 days	1-2 months
Ham, fully cooked- half	3-5 days	1-2 months
Ham, fully cooked - slices	3-4 days	1-2 months
Fresh Meat		
Beef steaks	3-5 days	6-12 months
Beef roasts	3-5 days	6-12 months
Lamb chops	3-5 days	6-9 months
Lamb roasts	3-5 days	6-9 months
Pork chops	3-5 days	4-6 months
Pork roasts	3-5 days	4-6 months
Veal roasts	3-5 days	4-8 months
Variety meats (tongue, brain, kidneys liver, heart, chitterlings)	1-2 days	3-4 months

* But not more than one week after the "sell by" date.

Cold Storage Chart Continued

Product	Refrigerator	Freezer
Meat Leftovers		
Cooked meats and meat dishes	3-4 days	2-3 months
Gravy and meat broth	1-2 days	2-3 months
Fresh Poultry		
Chicken or turkey, whole	1-2 days	1 year
Chicken or turkey pieces	1-2 days	9 months
Giblets	1-2 days	3-4 months
Cooked Poultry, leftover		
Fried chicken	3-4 days	4 months
Cooked poultry dishes	3-4 days	4-6 months
Pieces, plain	3-4 days	4 months
Pieces covered with broth, gravy	1-2 days	6 months
Chicken nuggets, patties	1-2 days	1-3 months

(From: Preventing Foodborne Illness: A Guide to Safe Food Handling, Home and Garden Bulletin #247, September 1990, United States Department of Agriculture, Food Safety and Inspection Service.)

Preparing Foods Safely

PRIMARY INFORMATION

What Every Family Child Care Provider Should Know

The following suggestions will help you to prepare foods safely. They are also important lessons for the children to learn. **When children are helping you prepare snacks and meals, always begin with handwashing. Stress the importance of using clean utensils and equipment and be careful that children do not taste foods containing raw or not fully cooked eggs, meat, poultry or fish.**

- Wash your hands in hot soapy water before preparing food and after using the bathroom, changing diapers and handling pets. If children are helping you prepare the foods or set the table, make sure they wash their hands also. Always wash your hands in the bathroom sink. The kitchen sink should be reserved for food preparation and should be kept as clean as possible.
- If there is any kind of cut or infection on your hands, use rubber or plastic gloves.
- Do not sneeze or cough on foods.
- Bacteria can live in kitchen towels, sponges, and cloths. Wash towels and cloths daily. If a sponge is used for dishwashing it should be kept in a dish of soaking solution that is made fresh daily. (See page 9, #3.)
- Wash fresh fruits and vegetables with plain water to remove pesticide residues and other impurities like soil particles.
- Keep raw meat, poultry and fish and their juices away from other food. For instance, wash your hands, cutting board, and knife in hot soapy water after cutting up chicken and before dicing salad ingredients.
- Don't taste any food of animal origin when it is raw or while it is cooking.
- Use plastic cutting boards rather than wooden ones where bacteria can hide in grooves.
- Keep your refrigerator clean. Wipe spills immediately and keep all surfaces sanitized.
- Thaw food in the microwave (follow the manufacturer's directions) or refrigerator, not on the kitchen counter. When food thaws on the kitchen counter, bacteria can grow in the outer layers of the food before the inside thaws.
- Foods thawed properly, for example in the refrigerator, can be safely refrozen.
- For faster thawing, put the package of frozen food in a water tight plastic bag and put it in cold (*not hot*) water. Change the water every 30 minutes. The cold water temperature slows bacterial growth that may occur on the outer thawed portions while the inner areas are still thawing.
- Marinate foods in the refrigerator. Do not allow them to marinate while sitting out on the kitchen counter. Leaving foods on the counter allows them to become infected with bacteria.

(From: Preventing Foodborne Illness: A Guide to Safe Food Handling, Home and Garden Bulletin #247, September 1990, United States Department of Agriculture, Food Safety and Inspection Service.)

Cooking Foods Safely

PRIMARY INFORMATION

What Every Family Child Care Provider Should Know

Bacteria thrive and grow in some temperatures and are killed by other temperatures. This is why the way that you cook foods has so much to do with keeping foods safe. Follow these guidelines.

- **Cook foods thoroughly. It takes thorough cooking to kill harmful bacteria.** Do not eat raw or partially cooked meat, poultry, fish, or eggs. This includes hamburger patties that are red in the middle and rare and medium rare steaks and roast beef.
- **Completely cook meat and poultry at one time.** Avoid interrupting the cooking before the food is done and returning later to finish it.
- **Cook red meat to 160 degrees Fahrenheit. Cook poultry to 180 degrees Fahrenheit.** Use a meat thermometer to check that it's cooked all the way through. For red meat, insert the tip of the thermometer into the thickest part avoiding bone, fat or gristle. For poultry, insert the tip of the thermometer in the thick part of the thigh.
- **When cooking frozen meat or poultry that has not been defrosted, cook it about 1-1/2 times the length of time required for the same cut when it is thawed.**
- **To check visually, red meat is done when it is brown or grey inside. Poultry is done when its juices run clear. Fish is done when it flakes with a fork.**
- **Cooking temperatures in conventional ovens should be at least 325 degrees Fahrenheit.** Do not use recipes that call for cooking without a reliable and continuous heat source.
- **Salmonella, a bacteria that causes food poisoning, can grow inside fresh, unbroken eggs. To kill salmonella bacteria, cook eggs until the yolk and white are firm, not runny. Scramble eggs to a firm texture. Don't use recipes in which eggs remain raw or only partially cooked.**
- **When using a slow cooker, cook food for at least 2 hours.** It takes that long for slow cookers to heat food to the temperature that kills bacteria. Do not fill the cooker more than 2/3 full and always keep covered with the lid. Check the internal temperature to be sure food is thoroughly cooked to at least 160 degrees Fahrenheit.
- **When you cook ahead, divide large portions of food into small, shallow containers for refrigeration.** This ensures safe, rapid cooling and does not give time for bacteria to grow.

(From: Preventing Foodborne Illness: A Guide to Safe Food Handling, Home and Garden Bulletin #247, September 1990, United States Department of Agriculture, Food Safety and Inspection Service.)

Special Issue: Safe Microwaving

Microwaves are a great timesaver in the kitchen. However, they have one food safety disadvantage. They sometimes leave cold spots in food where bacteria can survive. To help prevent this, follow these suggestions.

- Cover food with a lid or plastic wrap so steam can aid thorough cooking. Vent wrap and make sure it doesn't touch the food.
- Stir and rotate your food for even cooking. If your microwave is not equipped with a turntable, rotate the dish 1/4 turn once or twice during cooking.
- Follow the recipe or packaged foods directions for letting foods stand after cooking. During the standing time, food finishes cooking.
- Use the oven temperature probe or a meat thermometer to check that food is done. Insert it at several spots.
- Never use a microwave oven to heat baby bottles or baby food.

(From: Preventing Foodborne Illness: A Guide to Safe Food Handling, Home and Garden Bulletin #247, September 1990, United States Department of Agriculture, Food Safety and Inspection Service.)

Serving Food Safely

PRIMARY INFORMATION

What Every Family Child Care Provider Should Know

Foods that are being served can become a breeding ground for bacteria. **Follow these suggestions to keep foods you are serving safe from the bacteria that causes foodborne illnesses.**

- **Wash hands with soap and water for at least 20 seconds before preparing, eating or serving food.**
- **Keep hot foods hot and cold foods cold.** Foods held at room temperature for more than 2 hours during serving should be thrown away.
- **Never leave perishable food out of the refrigerator over 2 hours.** Bacteria that can cause food poisoning grow quickly at warm temperatures. Refrigerate leftovers as soon after eating as possible.
- **Fresh foods should not be added to a serving dish or platter containing foods that have already been out for serving.**
- **Use clean dishes and utensils to serve food, not those used in preparation.** Serve grilled food on a clean plate, not the one that held the raw meat, poultry, or fish.
- **Pack lunches in insulated carriers with a cold pack. Caution children never to leave lunches in the direct sun or near a heat source.**
- **When using a thermos for hot food, rinse the thermos with boiling water just before using. Bring the soup or other hot food to as high a temperature as possible before pouring it in the thermos.** The food should be too hot to touch at serving time.
- **Carry picnic food in a cooler with a cold pack. When possible, put the cooler in the shade. Make sure food is cold or frozen before you place it in the cooler. Keep the lid on the cooler as much as you can.**
- **If you are picnicking and soap and water are not available, clean your hands with disposable, wet handwipes before and after working with food.**
- **When you have a party, keep cold party food on ice or serve it throughout the party from platters from the refrigerator. Likewise, divide hot party foods into smaller serving platters. Keep platters refrigerated until time to warm them up for serving.**
- **Home canned foods, wild game and home slaughtered meats should not be served to day care children and are not creditable by the Child and Adult Care Food Program.**

(From: Preventing Foodborne Illness: A Guide to Safe Food Handling, Home and Garden Bulletin #247, September 1990, United States Department of Agriculture, Food Safety and Inspection Service.)

Using Leftovers Safely

PRIMARY INFORMATION

What Every Family Child Care Provider Should Know

Leftovers can be an important part of your menu plan. By using them wisely you can save both time and money. However, leftovers that are not stored or reheated correctly can become infected with the bacterias that cause foodborne illnesses. **To use leftovers safely, follow these guidelines.**

- **Wash hands before handling leftovers and use clean utensils and surfaces.**

- Divide large amounts of leftovers into small, **covered, shallow containers (less than 2 inches deep) for quick cooling in the refrigerator. Don't pack the refrigerator- cool air must circulate to keep food cool and safe.**

- **Date leftovers so that they can be used within a safe time. Avoid tasting old leftovers.**

- **With poultry or other stuffed meats, remove the stuffing and refrigerate it in separate containers.**

- **When reheating sauces, soups and gravy, bring them to a boil. Heat other leftovers thoroughly to 165 degrees Fahrenheit.**

- **When microwaving leftovers, cover with a lid or plastic wrap for thorough heating.**

- **Never taste food that looks or smells strange to see if you can use it. If in doubt, throw it out.** Dispose of possibly unsafe leftovers in the garbage disposal or in tightly wrapped or closed packages so that foods cannot be consumed by people or animals.

- **Most moldy foods should be thrown away.** The poisons molds can form are found mostly under the surface of food. You can sometimes save hard cheese and salamis and firm fruits and vegetables by cutting the mold out. But don't only remove the mold you see. To be safe you should also remove a large area around the mold.

(From: Preventing Foodborne Illness: A Guide to Safe Food Handling, Home and Garden Bulletin #247, September 1990, United States Department of Agriculture, Food Safety and Inspection Service.)

Special Issue: Special Care for Special Foods

Some foods require special care either because they are more vulnerable to bacteria that can cause foodborne illness or have unusual characteristics. This section provides additional information on handling some of those "special care" foods.

Ground Meat and Ground Poultry

Because of the grinding and mixing process, ground meat and ground poultry are handled more than other cuts of meat. Therefore they are more likely to be contaminated by bacteria. To destroy any bacteria that might be present in ground meat or ground poultry, cook it thoroughly. Patties should be cooked until they are hot, steaming, and the juices run clear, with no evidence of pink color in the center. When preparing a meatloaf or casserole, use a meat thermometer to make sure it cooks to at least 160 degrees Fahrenheit.

Ham

Ham is the meat from the leg or shoulder of the pig. It may be "fresh" (uncured), cured, or smoked. Hams are sold plastic-wrapped, vacuum-packaged in plastic, in a can, or country style. When purchasing a ham, read the label carefully. The label will tell you if the ham is cured or smoked, if it is "fully-cooked," and if it must be refrigerated.

Hams labeled "fully cooked" can be served cold or reheated to an internal temperature of 140 degrees Fahrenheit. All other hams must be cooked to an internal temperature of at least 160 degrees Fahrenheit before serving.

Both plastic-wrapped and vacuum-packaged plastic-wrapped hams must be refrigerated. A plastic-wrapped ham will keep about one week. A vacuum-packaged ham should be consumed by the "use by" date or within one week after the "sell by" date.

Both plastic-wrapped and vacuum-packed plastic-wrapped hams can be frozen. To preserve texture and flavor in the freezer, wrap the ham tightly in an extra layer of freezer paper or plastic and use within two months.

Canned hams labeled "keep refrigerated" require refrigeration and, unopened, will keep 6 to 9 months in the refrigerator. Make sure the can is not showing any bulges, cracks, dents, or rust, or leaking any liquid. A canned ham should not be frozen. Shelf-stable canned hams do not require refrigeration and may be stored in a cool, dry place for 2 to 5 years.

Country style hams are dry-cured with salt and aged for a distinctive flavor. Some country style hams are also smoked. Unopened country style hams can be kept up to 1 year without refrigeration. Once the ham is cut, exposing the moist interior, in must be stored in the refrigerator and should be used within 2 to 3 months. After the ham has been soaked, or soaked and cooked, it should be used within 5 days.

Hotdogs and Lunch Meats

Hotdogs and lunch meats are processed to last longer than many other meat and poultry products. However, some bacteria can grow slowly during refrigeration. Therefore, it is important to use, freeze, or throw away these products within the recommended length of time.

Hotdogs and lunch meats will keep in the original vacuum-sealed pouch for 2 weeks. They should never be kept longer than 1 week after the sell-by date, unless frozen. When freezing these products, do so as soon as possible after purchase. Freezing may lead to loss of flavor and texture after 1 to 2 months.

Watch the liquid that often forms around hotdogs. If it's cloudy, it can be a sign that spoilage bacteria have started growing. Throw away hotdogs with cloudy liquid.

Once a package of hotdogs or lunch meat is opened, rewrap it well and plan to use hotdogs in 1 week, lunch meats in 3 to 5 days.

Eggs and Egg-Rich Foods

Due to the possibility of contamination with salmonella or other bacteria, it is important to handle eggs and egg-rich foods properly. Follow these practices:

- Buy grade AA or A eggs with clean, uncracked shells.
- Do not buy unrefrigerated eggs.
- Refrigerate eggs in the original carton.
- Cook eggs thoroughly--until the yolk is not runny and the white is firm. Cook scrambled eggs until firm.
- Avoid foods that contain raw eggs, such as Caesar salad or homemade mayonnaise, ice cream or eggnog.
- Avoid foods that contain lightly cooked eggs such as chilled chocolate mousse or soft meringues that are only slightly cooked.
- Eggs and egg-rich foods should never be kept out of the refrigerator for more than 2 hours, including serving time.
- To ensure safe Easter eggs, do not leave hard-cooked dyed eggs at room temperature for more than 2 hours. Hard-cooking an egg destroys much of its natural protection and makes it more susceptible to bacterial growth.

Mayonnaise

Contrary to what many people believe, adding commercial mayonnaise to food does not increase the chances that it will cause foodborne illness. Commercial mayonnaise is made with pasteurized eggs. In addition, most commercially prepared mayonnaise contains ingredients such as vinegar, lemon juice, and salt, which slow the growth of bacteria.

Shelf-Stable Products

Shelf-stable products packaged in plastic containers, foil packages, waxed paper cartons, metal cans, and glass jars have extended shelf lives. However, this does not mean that they last forever. There are limits to how long these foods processing methods can preserve foods. Here are some tips on using these products wisely:

- Check the labels on unfamiliar products that look shelf stable to be sure that they do not require refrigeration. Also check the package for a "sell by" or "use by" date.

- Store shelf-stable products in a cool (below 85 degrees F), clean, dry place.

- When storing products in the pantry, place newly purchased packages behind older ones so that each package can be used within its recommended shelf life.

- Carefully check package conditions before use. Most foods in plastic, foil, or paper that has been punctured or torn should be thrown away. An exception to this would be rice or noodles with no visible contaminants like pests or mold.

- In general, high-acid canned foods (for example tomatoes, grapefruit, pineapple) can be stored in the cabinet for 12-18 months; low-acid canned foods (for example stew, carrots, spinach) will keep 2 to 5 years, without loosing quality.

- As a safety precaution, boil all low-acid home-canned foods for at least 10 minutes before serving. Add 1 minute of boiling time for every 1,000 feet above sea level.

- Leaking, bulging, badly dented, or rusted cans; cracked jars or jars with loose bulging lids; foods with a foul odor, or any container that spurts liquid when you open it may indicate the presence of the bacteria that causes botulism. If possible, avoid opening such foods. **Never taste them.**

- Report any suspect commercially canned foods to your local health department. To dispose of suspect home-canned products, it is best to enclose the food, in its original container, in a heavy garbage bag marked "POISON" and place the bag in a trash container that is not accessible to homeless people, children, or animals.

- If a suspect canned food is opened in your kitchen, thoroughly scrub the can opener or other utensil, containers, counters, etc., that might have contacted the food or its container. Throw away any sponges or cloths used in the cleanup. Wash your hands thoroughly. Launder any clothing that might have been splattered upon as soon as possible.

(From: Preventing Foodborne Illness: A Guide to Safe Food Handling, Home and Garden Bulletin #247, September 1990, United States Department of Agriculture, Food Safety and Inspection Service.)

CHAPTER 6

HEALTHY CHILDREN IN SAFE ENVIRONMENTS

A Safe And Healthy Childhood

As a family child care provider one of your most important tasks is to assure the health and safety of the children in your care. Providing children with good, nutritious choices at meal and snack times is a big part of keeping them healthy. But a healthy diet alone will not insure a child's health. Children need exercise, rest, and immunizations to protect them from preventable diseases. They also need dental practices that promote good oral health and a clean and safe environment in which to learn and play. This chapter provides additional information that you, as a provider, may find helpful in insuring the health and safety of the children in your child care home.

In this chapter you will learn about:

health screenings | page 3
exercise | page 5
adequate rest | page 9
immunizations | page 11
poison prevention | page 15
safe art and craft supplies | page 19
preventing exposure to lead | page 21
oral health | page 23
using a car seat correctly | page 25
a safe space for children | page 27

There is also information on special issues:

obesity | page 7
measles epidemic | page 13
when a used car seat is safe | page 26

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Health Screenings

PRIMARY INFORMATION

What Every Family Child Care Provider Should Know

Health screenings are very simple tests that are performed on children to detect medical conditions that may need attention. Screenings usually include taking measurements of growth and development, checking vision and hearing, testing for lead exposure and tuberculosis. Without screenings, problems may go unnoticed and may result in more serious health problems that could have been avoided.

Ask the parents if they have received health screenings for their children. If not, recommend that they do so. Suggest that they see their health care provider or call the local county health department.

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Exercise

PRIMARY INFORMATION

What Every Family Child Care Provider Should Know

Getting plenty of exercise is important to a healthy childhood and to the development of habits that will help children be healthy adults. Even in cold weather children can be bundled up to play outdoors for a short time.

Unfortunately, studies show that children get less physical exercise today than ever before. Instead they are spending more and more time in front of the television. The television and video games can be pretty tough competition for more physical activities like dodge ball and hide-and-go-seek. However, while you can not make a child exercise, you can make rules that limit their T.V. viewing.

- **Establish a regular time for physical activities and give children a safe place in which to run and play.**
- **Be prepared for rainy days by developing some indoor activities that get children moving.**
- **Make sure that the games or activities are appropriate for children of their age and stage of development and emphasize participation and effort rather than winning or loosing.**
- **Remember: Some children enjoy physical activity more than others. You can not make them exercise and you should not try. Your job is to give them the opportunity, a little encouragement, and to keep it fun.**

If you have a yard where children can play safely, it will be easy for you to provide an opportunity for active play. If not, it may take some extra effort on your part. Try taking children for a walk, or to a nearby park to play. Consider meeting another provider and her children for an afternoon in the park. **There are also games and activities that can be played safely indoors. For a few suggestions, see the following page.**

Make sure the children you care for get exercise every day. When you can't go outside, try these indoor activities.

- **Have fun to music.** Most children love to dance. All you need to do is simply turn on the radio and give them a little encouragement. You can also purchase tapes and records made for children. Some of these feature musical games or instruct children to make particular movements to the music.

- **Play games with nerf balls.** Nerf balls are soft balls made of foam that are safe for indoor play. Try letting the children takes turns throwing the ball into the laundry basket or a paper sack. Place the sack on its side and let them try to roll the nerf ball into the sack.

- **Play "walk the line."** Using masking tape, make a straight line on the floor. Can the children walk the line without "falling off?"

- **Play "Guess what animal I am?"** Let each child have a turn at acting like their favorite animal while the other children try to identify the animal. At first try using only movements. If no one can identify the animal, try adding sounds.

- **Make an obstacle course using items in your home**. For example, make a hill with a pile of pillows and have the children lie on their sides and roll over it. Use the backs of two chairs and a blanket to make a tunnel. Have the children squat down and sitting on their heels, waddle like a duck through the tunnel.

- **Play "follow the leader" or "do as I do."** Lead the children on the first round and keep them active. This will also give them ideas for the kinds of moves they can do when it is their turn as leader. Keep in mind that children can get exercise by walking in place. They don't have to literally move through the house to keep moving. Remember to move the upper part of the body as well as the lower part and to use slow, stretching movement as well as quick movements.

Make the activities safe, fun,
non-competitive, and age appropriate.
Praise children for participation and for effort.

Special Issue: Obesity

Obesity can be a serious problem for a child, both in terms of physical health and in terms of psychological health. Between 1965 and 1985, obesity among children has increased by 50%. Fifty percent of hypertension in children is related to obesity and one in 4 children have elevated cholesterol levels.

If you care for an overweight or obese child the temptation may be to restrict that child's food intake. At times a parent may ask you to put his or her child on a diet. Regardless of the child's weight, **do not restrict the child's food intake unless the child is under the supervision of a physician.** Obesity is a very complex issue. Restrictive diets are seldom the answer. **For children, a restrictive diet could create serious health problems. Restricting a child's diet could lead to a loss of protein and could result in impaired growth, hair loss, gallstones and other health problems.**

Follow the dietary guidelines for Americans unless a physician tells you otherwise. In most cases, you will find that overweight children will loose weight naturally if you lower the fat content of the foods you serve (only for children over 2 years old), limit the amount of T.V. viewing and provide opportunity and encouragement for increased levels of physical activity. If you believe a child's weight problem could be serious, or if the parents continue to express their concern, recommend taking the child to see a health care professional.

Never restrict a child's diet unless you have been told to do so by a health care provider. As a provider, your responsibility in preventing obesity in children is to:

- **reduce the fat intake for children over 2 years old.**
- **limit the amount of T.V children watch.**
- **increase their level of physical activity.**

Adequate Rest

PRIMARY INFORMATION

What Every Family Child Care Provider Should Know

A time for rest or quiet play is important for the children and for the provider. Establish a regular rest time. Don't try to force children who are not sleepy to nap, but let them look at a book or engage in some other quiet, restful activity. Be sure they don't interfere with other children who wish to nap or with your own rest or quiet activity.

At times you may have a child who appears to be more tired and sleepy than the other children. Remember that you may not be aware of all that is going on in the child's home. A temporary problem or stress situation in the child's home may have caused him or her to lose sleep. Be flexible enough to allow the child extra time for napping.

Immunizations

PRIMARY INFORMATION

What Every Family Child Care Provider Should Know

All 50 states and the District of Columbia have laws requiring immunizations for entering school and for attending child care. Still, nationwide, only about 70 to 80 percent of young children are properly immunized. In some rural and inner city areas only 50% of young children are properly immunized. Most of the young children who are not properly immunized are preschool age.

Ask parents for proof of their children's immunization and keep a copy for your files. If children are not immunized, instruct the parent on what to do. Make extra copies of the chart on the following page to give to the parents of children who are not properly immunized. Suggest that they call their health care provider or the County Health Department for more information.

Children who are not properly immunized run the risk of getting very serious diseases which are 100% preventable through immunization. Their disease could then spread to other children who lack immunizations.

It is your responsibility, in assuring the health of the children in your care, to see that the parents have their children properly immunized and provide you with proof of their immunizations.

RECOMMENDED IMMUNIZATION SCHEDULE

Child's Age at Vaccination	
Birth	Hepatitis B.
1 - 2 months	Hepatitus B.
2 months	Diphtheria/Tetanus/Pertussis (DTP), Polio, Hib.
4 months	Diphtheria/Tetanus/Pertussis (DTP), Polio, Hib.
6 months	Diphtheria/Tetanus/Pertussis (DTP), Hib.
6 - 18 months	Hepatitus B.
12 - 15 months	Hib.
15 months	Measles, mumps, rubella (MMR).
15 - 18 months	Diphtheria/Tetanus/Pertussis (DTP), Polio.
4 - 6 years	Diphtheria/Tetanus/Pertussis (DTP), Polio.
11 - 12 years	Measles, mumps, rubella (MMR).
14 - 16 years	Tetanus-Diphtheria (Td)

These recommendations are accepted by most health care providers. Consult your local health care provider or county health department for more information.

Special Issue: Measles Epidemic

Before the measles vaccine received approval in 1963, an average of more than 500,000 cases of measles were reported each year, killing 400-500 people. In the last few years there has been a resurgence of measles in the United States. Some 45,000 cases of measles and approximately 120 deaths were reported for 1989 and 1990. Nearly half of these cases occurred in preschool children who were not vaccinated.

The biggest cause of the measles epidemic is the failure to immunize young children at an early enough age. Insist on seeing proof of a child's immunization before accepting a child for care. Keep a copy of the proof in your files.

Poison Prevention

PRIMARY INFORMATION

What Every Family Child Care Provider Should Know

Poisonous Household Substances:

These common household substances are poisonous. Leave them in their original containers and keep them locked away, out of the reach of children.

- Alcohol
- Ammonia
- Bleaches
- Cosmetic (Including nail polish, removers, and permanent wave solutions)
- Detergent
- Fertilizers
- Medicines (including liniment, iron pills, aspirin, cold medicine, and tranquilizers)
- Furniture polish
- Kerosene, Gasoline, Lighter Fluid and other petroleum products
- Lye and other caustics
- Paint Removers
- Paints
- Paint Thinners
- Turpentine
- Pesticides or Rat Poisons
- Some Houseplants (see the list of poisonous plants on page 16.)
- Weed Killers

(Source: Safe Daycare: A Teachers Guide For Creating Safe and Healthy Learning Environments for Preschool Children, Wisconsin Comprehensive Child Injury Prevention Project, Division of Health, Wisconsin Department of Health and Social Service, 1 West Wilson Street, P.O. Box 309, Madison, Wisconsin, 53701-0309.)

Poisonous Plants

Plants are a common cause of poisoning for preschoolers. One of the ways children this age explore the world is by putting things in their mouths. This includes the sometimes poisonous berries, flowers, and leaves of plants. Some poisonous plants cause rashes or upset stomachs, while others cause death.

On the following page is a *partial* list of very dangerous poisonous plants. In some cases children who have eaten their berries, leaves, or flowers have actually died. **On page 17 is a list of plants that are known to be safe for children.** Neither of these lists are complete. There are hundreds of different plants, some of them poisonous and some of them not. It is impossible to list them all.

- **If you choose to have plants in the areas of your home or yard where children may be, select plants from the list of safe plants on page 17.**

- Even though you have selected safe plants, supervise young children when they are around them. Instruct **them not to put any part of the plant in their mouths.** Not only is this a good general rule for them to learn and follow, but even too much of a safe plant could make them sick.

- Remember that **children may also be exposed to plants in the park, playground, grocery store, neighbor's yard, and on walks in the woods, in the mall, or in your neighborhood.**

- **Keep the telephone number of your local poison control center posted near your phone with other emergency numbers.**

- **If a child swallows any part of a poisonous plant, or any part of a plant that you can not positively identify as one of the plants on the safe plants list, take the child and a piece of the plant to the phone and call your local Poison Center.**

- **Keep an unexpired bottle of Syrup of Ipecac in your first aid kit at all times. Use it only when instructed to do so by a health care professional or poison control person.**

Poisonous Indoor and Outdoor Plants

This is not a complete list. Do not assume plants that are not listed here are safe. Choose safe plants from the list on page 17.

Autumn crocus
Bleeding Heart
Azalea
Baneberry
Belladonnna
Bird of Paradise
Bittersweet
Black cherry
Black locust
Black Snakeroot
Boxwood
Buskeye
Buttercups
Caladium
Caper spurge
Castor bean
Cherry
Chinaberry
Chrysanthemum
Daffodil
Daphne
Delphinium
Dieffenbachia
Dumbcane
Duranta
Elderberry
English Ivy
English yew
False hellebore
Foxglove
Golden chain
Holly
Horse Chestnut
Hyacinth
Hydrangea
Iris
Jack-in-the-pulpit
Jequirity bean (Rosary pea)
Jerusalem Cherry
Jessamine
Jimson Weed
Jonquil
Larkspur
Lantana
Laurel
Lily of the valley
Lupine
Mistletoe
Monkshood
Moonseed
Morning glory
Mother-in-law
Mountain laurel
Mushrooms (certain ones)
Narcissus
Nightshade
Oak tree
Oleander
Poison hemlock
Poison ivy, oak, sumac
Pokeweed
Privet
Philodendron
Rhododendron
Rosary pea
Rubber vine
Sandbox Tree
Skunk Cabbage
Tansy
Thorn apple
Tobacco
Tung oil tree
Water hemlock
White snakeroot
Yellow jessamine
Yellow oleander
Yew

In addition the following parts of edible plants are poisonous:
sprouts and green parts of a potato
rhubarb leaves
green parts of tomato

Safe Plants

For safe plants to grow in the areas of your home and yard where children may be, choose from this list.

Common Name	Botanical Name
African Violet	Saintpaulia ionantha
Aluminum plant	Pile cadieerei
Begonia	Begonia semperflorens
Boston Fern	Nephrolepis exaltata
Coleus	Coleus blumei
Dracaena	Dracaena fragrans
Hens-and-chickens	Sempervivum tectorum
Jade plant	Crassula argentea
Mother-in-law's tongue	Sansevieria trifasciata
Peperomia	Peperomia obusifolia
Prayer plant	Maranta leuconeura
Rubber plant	Ficus elastica
Sensitive plant	Mimosa pudica
Spider plant	Clorophytum comosum
Swedish ivy	Plectranthus australis
Wandering jew	Tradescantia fluminensis
Wax plant	Hoya carnosa
Weeping fig	Ficus benjamina

Safe Art and Craft Supplies

PRIMARY INFORMATION

What Every Family Child Care Provider Should Know

Many providers have discovered relatively inexpensive art and craft supplies that provide children with hours of learning and fun. When you purchase arts and crafts supplies for activities with the children in your care, make sure they are safe. Remember the tendency children have to put things in their mouths.

It is easier than ever before to select safe art and craft supplies, due to the November 1990 changes in the labeling laws. **Any art and craft material that is dangerous for young children is labeled "HAZARD". When buying art and craft materials, look for products without the "HAZARD" label.**

You can be sure a product is safe for children if it has one of the following labels:

CP NONTOXIC
Meets Performance Standard
Conforms to ASTM D-4236

AP NONTOXIC
Conforms to ASTM D-4236

Certified by Arts and Crafts Institute
HEALTH LABEL
Conforms to ASTM D-4236
Non-toxic or No Health Labeling Required

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Preventing Exposure to Lead

PRIMARY INFORMATION

What Every Family Child Care Provider Should Know

Lead poisoning is the number one environmental threat to the health of children in the United States and is totally preventable. The damage that results from lead exposure can be a very serious problem for young children. Large amounts of lead can cause serious damage to the brain, kidneys, nervous system, and red blood cells. Even small amounts of lead can interfere with a child's learning and behavior. Although lead poisoning can be treated medically, the treatment can not correct damage to the brain or nervous system. Some damage is permanent.

Children are most often exposed to lead by eating lead-based paint from peeling or flaking walls or window sills. While most paints sold since the mid 1970's are lead free, many older homes and public buildings still have layers of lead paint.

Lead also gets into children's bodies when they put fingers, hands, and toys in their mouths after playing in an area with lead contaminated soil or dust. The soil becomes contaminated with lead from paint scrapings from buildings or from car exhaust when leaded gasoline was used.

Lead was sometimes used in old pipes and plumbing. Water becomes contaminated as it travels through the pipes. **Some food cans are made using lead.** In some cases the lead can seep into the food.

Preschoolers are at highest risk for lead poisoning because of their tendency to put their fingers and other objects in their mouths. Protect the children in your care from exposure to lead. Follow the suggestions on the next page.

Protect the children in your care from exposure to lead.

- Comply fully and promptly with all applicable state and local regulations regarding lead testing and removal. Call your state or county health departments for more information.

- Have soil tested. Contact your nearest agricultural extension service for information. Never let a child dig in contaminated soil.

- Remove or cover contaminated soil (pave, sod, or add mulch, gravel, or new topsoil.)

- Plant bushes close to buildings to discourage play there.

- Plant gardens and establish play areas away from painted structures and busy roads.

- Install a fence or bushes as a barrier between busy streets and play areas or gardens.

- Provide a diet rich in iron and calcium and low in fats.

- Use the same measures recommended to control the spread of germs, like hand washing and washing surfaces, to help prevent lead dust buildup on hands and surfaces.

- Clean your own and children's hands frequently, especially before preparing food and eating. Also wash hands after touching pets, shoes, art supplies, and after gardening, crawling or playing in the dirt.

- Wet-mop floors, window wells, and window sills frequently (every 2 weeks or more often) with a high phosphate detergent such as TSP, Spic and Span, or Calgon.

- Provide clean teething toys to discourage chewing on railings, painted items, or paper products.

- Teach children to throw away any food that falls on the floor.

- Make sure children keep outdoor toys outside and indoor toys inside. Toys out of doors collect more lead dust, which should not be brought inside.

- Use only cold water for drinking and making formula.

- Let cold water run for 5 minutes the first time the tap is used each day.

- Do not cook or heat food in its own can.

- Do not store food in an opened can.

Sources: This information was adapted from Healthy Young Children: A Manual for Programs. Kendrick, Kaufmann, & Messenger Eds., NAEYC: 1988, p.209-210 and Resource Mothers Handbook. National Commission to Prevent Infant Mortality, 330 C St., SW, Switzer Building, Room 2014, Washington, D.C., 20201.

(For more information call the National Lead Information Center at 1-800-LEAD-FYI or The Alliance to End Childhood lead Poisoning at 202-543-1147.)

Oral Health

PRIMARY INFORMATION

What Every Family Child Care Provider Should Know

Poor oral health for children can cause painful tooth aches and can make children sick. Badly decayed teeth may become infected and will need to be pulled. In addition, poor oral health may contribute to poor eating habits, speech problems, crooked teeth, damaged adult teeth, and yellow or brown adult teeth. The belief that baby teeth don't matter is wrong. Baby teeth do matter.

Most of us are familiar with the connection between sweets and cavities. This issue will be explored in the nutrition section of this manual. We may not be so familiar with what is referred to as Baby Bottle Tooth Decay.

Baby Bottle Tooth Decay results from children going to bed with a bottle containing milk or a sweet drink or carrying the bottle in his or her mouth throughout the day. Almost any kind of drink except water can cause a baby's teeth to decay. Prolonged expose to the drink is especially harmful when a baby falls asleep with a bottle in his or her mouth.

To protect children against baby bottle tooth decay:

- Use a bottle at meal times only. Be sure to hold the baby's bottle yourself.
- Put the baby to bed without a bottle, or fill the bottle with water.
- Suggest to the parent(s) that they clean the baby's teeth and gums each day with a clean washcloth or a small soft toothbrush.
- Suggest to the parents that they ask their dentist about fluoride for their child. Fluoride can help protect teeth from decay.
- Offer a child a cup as soon as he or she can sit up alone. By the time a baby is one year old, he or she should not be using a bottle.

Try these instead of a bottle at nap or bedtime:

- Offer a blanket, a soft toy, or clean pacifier. Don't dip the pacifier in anything sweet.
- Sing or play music.
- Hold or rock the baby.
- Rub the child's head or back.
- Put a toy or mobile that plays music near the bed.
- Read to the child or tell a story.

This information on baby bottle tooth decay was taken from a brochure produced and distributed by: The Dental Health Foundation
4286 Redwood Highway, #261
San Rafael, Ca. 94903
415-499-4648

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Using a Car Seat Correctly

PRIMARY INFORMATION

What Every Family Child Care Provider Should Know

All states have requirements about using car seats for infants and toddlers. Used correctly, car seats are 71% effective in preventing fatalities, 67% effective in reducing the need for hospitalization and 50% effective in preventing minor injuries.

Become familiar with your state's age requirements for the use of car seats.

When you use car seats, use them correctly. Read and follow the directions and make sure you are using the right size (by weight) car seat for each child.

Make sure of the following:

Infant is positioned correctly.

For an infant up to 9 months or 20 pounds, the car seat must face the rear of the vehicle at a 30-degree recline. The rear facing, reclined position allows the baby's back, rather than abdomen and chest, to absorb the force of impact in a crash. For a toddler, the car seat must face forward in an upright position.

Harnesses is secured correctly

The harness straps on the car seat ensure that the child will remain in the seat during a crash. Harness straps should be snug - no more then one inch of slack - and should be secured over warm and not very bulky clothing for the best protection. If a chest clip is provided, it should secure the shoulder harness straps together to minimize slippage and should be positioned over the sternum (breastbone) area. Securing the shoulder harness straps together will also make it difficult for a child to wiggle out of the car seat.

Seat belt is routed correctly and secured to the car seat.

To ensure that the car seat will remain in the proper position during a crash, a car seat must be secured by a seat belt. The seat belt is often routed differently on each car seat, even on car seats that are made by the same company. A seat belt that is routed incorrectly or not secured to the seat of the car may allow the car seat to come apart or fly forward during a crash.

Tether strap is used

If a car seat is equipped with a tether strap, the tether strap must be used. A tether will give the car seat the necessary stability to remain upright in a crash.

Caution: If you buy a used car seat, make sure it is safe. Read the special issue "Is a Used Car Seat Safe?" that follows.

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Special Issue: When Is a Used Car Seat Safe?

Used car seats purchased from garage sales and second hand stores can save you money. However, you must take care to be sure the used car seat still functions as it did when it was new and is safe to use. When you buy a used car seat, make sure that the seat has:

- A label that says the child safety seat meets Federal Standards.
- A manufacture date. (Seats made before 1981 may not be as safe as newer seats.)
- An instruction booklet.
- All of its parts. Compare the picture of the seat in the instruction booklet to the safety seat.
- Not been in a crash. Check to see that there aren't any loose parts or any cracks. **A car seat that has been in a crash is unsafe and should not be used.**
- Not been recalled. **Phone the Auto Safety Hotline at (800) 424-9393** to find out if the seat has ever been recalled by the manufacturer because of a defect.

From: The National Highway Safety Administration. Reprinted from Child Health Talk, National Black Child Development Institute, Inc., Winter 1991/1992.

A Safe Space for Children

PRIMARY INFORMATION

What Every Family Child Care Provider Should Know

One of your biggest responsibilities is to provide children with a safe space for learning and playing. The safety check list that follows will help you to identify and eliminate potential safety hazards. This list may not contain all of the potential risks in your particular home. There may be other potential hazards. The most common types of accidents for children are falls, burns, cuts, suffocation, poisoning, drowning, firearms, and getting lost. Walk through your home and look for factors that might contribute to any of these kind of accidents.

Check your entire house to see that:

- Hot water temperature does not exceed 110 degrees Fahrenheit at the sink closest to the hot water heater.
- All electrical outlets not in use are inaccessible to children (use safety plugs).
- There is no peeling paint or flaking plaster.
- Large appliances or equipment fit as close as possible against the wall.
- There is sufficient means of exit from the house.
- Fixed and portable space heaters or wood stoves, hot radiators and pipes are protected with guards.
- Poisonous and other dangerous plants are out of reach.
- Purses are stored out of children's reach.
- Fish tanks are on sturdy counters or tabletops.
- There are no bean bag chairs in areas where children are present.
- Umbrellas are stored on high shelves out of children's reach.
- First aid supplies are available for home and to take on field trips.
- Firearms and ammunition are under lock and key and the empty gun is stored separately from the ammunition.
- Toys are checked regularly for sharp edges, broken pieces, or places that could hurt a child.
- Rooms that are not in use are locked.
- Electrical wires and drapery cords are shortened or secured.
- Cigarettes, matches, and lighters are out of sight and reach.
- Fireplace is well screened.
- Only non-slip rugs or carpets are used.
- There are no sharp edges or corners on furniture.
- Decorations are sturdy (cannot be pulled over easily).
- Liquor cabinet is locked.
- Rodent and insect poisons and traps are safely out of reach.

- All equipment is sturdy and safe.
- Windows and screens are secure but can be opened easily by you in case of fire.
- There are adequate fire escape provisions and children have practiced what they should do in case of a fire.
- Medicines and cosmetics are secured out of children's reach.
- Temperature in the home is neither excessively hot or cold.
- There are operating smoke detectors on each level of the house.
- Emergency numbers are posted on or near phones.
- Trash, indoors and outdoors, is stored properly and emptied regularly.

Never leave young children alone or allow them to run and play in the kitchen. Check your kitchen to see that:

- Flammables are placed away from stove.
- Knifes, sharp tools, cleaning supplies and other potential poisons are out of reach.
- There is a working fire extinguisher, fully charged, and placed away from the stove.
- The food preparation area is clean.
- Handles of kettles, pots and pans are turned toward back of the stove.
- There is a non-slip floor.
- Doors and cabinets are securely fastened.
- Microwave is at kitchen counter height, not on a lower microwave table that children can reach.
- Dishwasher door is always closed immediately after filling or emptying dishwasher.

Check Stairs and Halls to See That:

- Safety gates are in place. (Accordion style gates are not safe. They can trap baby's arm or neck. Use a horizontal type gate with slats 2 3/8 inches or less apart.*)
- Handrails are sturdy.
- Carpeting is securely tacked.
- The area is well lighted.
- There is no clutter on steps.
- Telephone cords are not hanging within children's reach.

Check Attic and Basement to See That:

- Access stairs are kept clear, safe, and well-lighted for use.
- Furnace and water heater are securely guarded.
- There is no litter.
- Tools are out of sight and reach; electrical tools are disconnected.
- There are no signs of rats, mice, or insects.
- There are no paints, solvents, or other combustibles stored in these areas.

* Source: Resource Mothers Handbook, The National Commission to Prevent Infant Mortality; 330 C Street, SW; Switzer Building Room 2014; Washington, D.C., 20201.

Check Yard to See That:

- Outside storage areas are locked.
- Outdoor area is securely fenced.
- Toys and play equipment are safe, in working order, and age appropriate.
- Swings, slides, and other permanent play equipment is correctly installed and bolted to the ground.
- Sand or sawdust is placed around and under play equipment to cushion falls.
- Swings, chains, and seats are in good repair and are rust-free.
- Water is changed daily in small play pools.
- Sandboxes are always covered when not in use.
- Water hoses are stored up high away from children.

Check Bathrooms to See That:

- Medicines, cosmetics, razor blades, cleaning supplies are kept out of sight and reach (preferably under lock and key).
- Light switches are safe from water splashes and wet fingers.
- Electrical appliances are disconnected and stored when not in use.
- There is a rubber mat and handhold in the tub.
- The door can be unlocked from the outside.
- Door is locked when not in use.
- There is a safe and sturdy stool for children to help small children comfortably reach the sink.
- Infants and young children are never left alone in the bathroom.

Parent's Pages

About the Parents' Pages

To the Provider:

These pages are for you to copy and give to the parents of the children in your care. If possible, and not too much more expensive, copy them on colored paper. It makes them easier for parents to find and gives them an "air" of importance.

The Parent's Pages perform 3 important functions.

1. These handouts will inform parents. They contain important information that will benefit parents of young children.
2. Sharing this information with parents will help you and parents work together as a team to teach their children healthy eating habits.
3. These handouts demonstrate your professionalism as a family child care provider. They show parents your concern, knowledge, and skill in caring for their children.

Make sure you do not give out your original copy of these pages.

You will need them for the new families you recruit.

This manual was made possible by an educational grant from Nestle USA, Inc. to
Save The Children Child Care Support Center.

Parents' Page: Eating Behaviors That Challenge Your Patience

Here are 4 common childhood eating behaviors that can leave parents frustrated and bewildered and some suggestions for how you might respond to them.

1. The messy eater.
All children will be messy eaters until they develop the coordination and skill required to master eating behavior.
What you can do: Don't expect too much from your child. Usually children are not good at using a fork and spoon until around age three. And even after they begin to use utensils, expect them to put their hands in their food. This is a natural way for them to explore the world. Children also need to learn that some behaviors are not appropriate at the table. However, children will not enjoy the meal if they are constantly being criticized or corrected. There are 2 major ways to prevent children from misbehaving at the table. The first is to avoid attempts at making them eat foods that they refuse to eat. In other words, do not provoke them by starting a food fight. The second thing you can do is to keep your child focused on the task of eating. Keep the atmosphere pleasant and relaxed and engage in quiet conversation about the different foods you have served or the day's events.

2. The picky eater.
While you need to respect children's likes and dislikes, you also need to recognize that their food preferences are still developing. Many children will automatically dislike a new food. This does not mean they will never like the food, or that you should stop serving it.
What you can do: Try preparing the food item differently. Wait a week or so and try it again. Never try to force or bribe a child into trying a food. This just leaves the child with a bad association with the food. Model good eating behavior yourself by eating the food and allow the child to leave the food they don't want on their plate. Warning: This will be harder than you think.

3. The child who goes on a food jag.
Many children go on food jags where they demand the same foods over and over.
What you can do: Stay calm and treat the demand casually. As long as the food the child is demanding is not empty calories- (high in sugar with little nutritional value) be patient until the food jag passes. He/she will soon grow out of it.

4. The child who develops food rituals.
Some children develop food rituals, like always wanting to wear a certain bib, use a certain cup, or have their sandwich cut in a particular way.
What you can do: Be patient. Your child is being exposed to a world of new things. Food rituals can help them feel more secure. Let them have their ritual until they decide to give them up.

Parents' Page: Introducing New Foods

Whatever you do, **never force or bribe a child to try a new food.** Even if you win that battle, you can bet that the next time the food is offered, your child will remember being forced or bribed to eat it, and will dislike the food even more.

Be patient when introducing new foods. Many children must be offered a food 8 to 10 times before they decide to try it and discover they like it. **Here are some things that you can do to help your child accept new foods:**

- **Introduce only one new food at a time. Find out what new food your provider is introducing and work together.**
- **Serve the new food with familiar foods.**
- **Serve only small amounts of the new food.**
- **Introduce a new food only when your child is hungry.**
- **Talk about the new food- its taste, its color, its texture, how it grows, etc.**
- **Let your child see you eating it and enjoying it.**
- **Encourage the child to taste the new food. If he or she rejects it, accept the refusal and try again in a week or so.**
- **Find out what is not liked about the new food. It may be something you can change, like the way the food is prepared. Sometimes a child will refuse a food prepared one way, but like it prepared another way.**

In spite of the frustration you may sometimes feel, it is important that you continue to offer new foods, even when your child rejects them. If you do not, your child may not have the variety in his or her diet needed for proper growth and development. In addition, your child will be robbed of the opportunity to experience new tastes and textures and to add new favorites to his or her diet.

Parents' Page:
The Most Common Nutritional Problems for Children

The biggest dietary concerns for children in the U.S. are iron deficiency anemia and not getting enough of vitamins A and C.

Iron Deficiency Anemia

Children who are suffering from iron deficiency are often pale, listless, and irritable. They may have little energy or appetite and frequent colds. Iron deficiency anemia results from either the failure to eat enough iron rich foods or the failure of the body to absorb the iron. Make sure your child gets enough iron by serving plenty of iron rich foods like **red meats, fish, green leafy vegetables like spinach and mustard greens, raisins and prunes, iron-rich breads, and dry beans and dry peas. To help the body absorb the iron, serve iron rich foods with foods containing vitamin C, like orange juice or tomatoes.** Do not serve children foods and beverages that contain caffeine. Caffeine interferes with the body's absorption of iron.

Vitamin A and Vitamin C

Vitamins A and C are the two vitamins most lacking in American children's diets. Neither of these vitamins are stored by the body. This means that the body's supply must be replenished regularly. **Offer your child foods that are a good source of vitamin C every day. Offer them foods that are a good source of vitamin A at least every other day.**

Some Good Sources of Vitamin C

Broccoli
Brussels sprouts
cabbage
Cauliflower
Collards
Kale
Okra
Peppers (sweet, hot, and chili)
Snow peas
Tomatoes
Cantaloupe
Grapefruit
Kiwi fruit
Lemon
Mango
Oranges
Papaya
Strawberries
Fruit juices enriched with vitamin C

Some Good Sources of Vitamin A

Bok choy
Carrots
Green Onion
Parsley
Pumpkin
Peppers (red, hot, chili)
Winter Squash
Sweet Potatoes
Tomatoes
Vegetable juices
Dark leafy greens
Apricots
Cantaloupe
Mango
Papaya
Persimmon
Apricot nectar
Vegetable juice cocktail

Parents' Page:
Can Quick and Easy Be Nutritious?
Yes. Here are a few hints.

Fresh·Vegetables: Some parents say that the problems they have with offering lots of fresh vegetables are the time and effort it takes to wash them, peel them and cut them, and the risk that they will spoil before they are eaten. If these are your complaints, try frozen vegetables. They can be just as nutritious, and sometimes even more nutritious than fresh. And most frozen vegetables cook well and even retain more nutrients when cooked in the microwave. Avoid the vegetables packaged with sauces and gravies.

Packaged Convenience Foods: A big problem with many packaged foods like macaroni and cheese, seasoned rice and pasta dishes, bread stuffing, and scalloped and au gratin potatoes is that they can be high in fat and sodium. Choose lowfat, low sodium versions of these products when they are available. If they are not available, try these suggestion to lower the fat and sodium.

- **Do not add additional salt, even when the directions call for it.**
- **When the directions call for whole milk, use lowfat milk instead.**
- **Reduce the amount of margarine called for in the recipe by 1/2.**

Fast Foods: Almost all of us have occasions when fast food meals are called for. And fast foods do provide some of the essential vitamins and minerals we need. However, there are 2 major drawbacks to eating fast foods. First, few fast food restaurants offer many food choices that are rich in calcium, fiber and vitamins A and C. Second, fast food meals are usually high in calories, fat and sodium relative to the amount of nutrients they provide. **Use the following tips to help you to make better choices when eating at fast food restaurants.**

The Main Selection: Choose regular sandwiches rather than doubles, and plain types rather than those with lots of extras like cheese, bacon, and "special" sauces. Order roast beef for a leaner option than most burgers. Breaded, deep-fat-fried fish and chicken sandwiches (especially with cheese or tartar sauce) have more fat and calories than a plain burger. When "fixing" your sandwich, load up on lettuce, tomato, and onion, and go easy on pickles, mustard, catsup, and other sauces. If you're having fried chicken, remove some or all of the breading before eating.

On the Side: Skip the fries if you are ordering a sandwich that is deep-fat fried or made with sauce or cheese. Order a small rather than a large portion, specify no salt, and add just a small amount yourself. Or choose a plain baked potato, mashed potatoes, or a salad instead of fries. Go easy on toppings like butter, sour cream and salad dressings and on creamy salads like potato salad, coleslaw and macaroni salad. Select cut vegetables and lowfat dressing to use for dip from the salad bar and let the family share. When ordering chicken, have a dinner roll instead of a biscuit.

Beverages: Choose lowfat or skim milk or ask for water.

A final tip: Don't make fast foods a habit. Instead, make your own convenience foods. Plan ahead. When you cook, cook extra. Freeze it in small containers so that it is available for quick, easy, nutritious meals.

Parents' Page: The Dietary Guidelines

Healthy eating habits are learned in childhood. Help me to teach your child healthy eating habits by following these dietary guidelines established by the United States Department of Agriculture and the United States Department of Health and Human Services.

1. Eat a variety of foods.

Variety means not only selecting foods from each of the five major food groups, but also variety in selection within the food groups. These 5 food groups are:

1. fruits
2. vegetables
3. breads, cereal, pastas and other foods made from grains
4. milk, yogurt and cheese
5. dry beans and dry peas, eggs, fish, poultry, and fish.

In order to get all of the nutrients our bodies need, we need variety in the food we eat over a several day period.

2. Maintain a Healthy Weight.

Some parents worry that their children are too heavy or too thin and they try to control the amount their child eats. Usually children are the best judge of how much food they should eat. They know when they are full. However, if you feel your child is underweight, offer more snacks throughout the day. Children can not eat too much food at one time so these regular snacks are very important. If you have a child who is overweight, it may be that they do not get enough exercise. Try turning off the t.v. Encourage your child to play outside and get more exercise. Find an activity in which the whole family can participate. If you believe your child's weight problem is serious, see your health care provider. Never try to force feed your child, and never restrict your child's diet unless directed to do so by a health professional.

3. Avoid too much fat, saturated fat, and cholesterol.

Children under two have a greater need for fat. Serve them whole milk and do not limit their fat intake. After age two, limit your child's fat intake along with that of the rest of your family. Use smaller amounts of fats and oils including salad dressings, mayonnaise, butter, margarine. Choose liquid vegetable oils instead of solid oils and tropical oils like palm oil and coconut oil. Serve lowfat or skim milk instead of whole milk, select leaner cuts of meat, serve fewer eggs and occasionally substitute dry beans and peas for meat. But remember, children burn lots of calories. By limiting fat, you are limiting a major source of calories in their diet. Make up for it by offering them more fruits, vegetables, and breads, grains and pastas.

4. Eat plenty of fruits and vegetables so that you get adequate starch and fiber.

Children are not known for their love of fruits and vegetables, but this may be due in part to our failure to give then many chances to like these foods. There is a great variety of fruits and vegetables to choose from. If your child doesn't like one, perhaps they will like another. If they don't like a vegetable cooked one way, they may like it cooked another way or even served raw with a dip. Many children prefer their vegetables lightly streamed so that they are still brightly colored and a little bit crisp. Never force or bribe your child into eating their fruits and vegetables, but don't give up either. Just keep offering them.

5. Avoid too much sugar.

There are three major problems with sugar. First, many foods high in sugar are not very nutritious. For a child who has a high need for nutrients, and a small stomach, filling up on sugary foods is a missed opportunity to get vitamins and minerals they need for proper growth and development. Second, the more frequently children eat foods containing sugar the greater their risk for tooth decay-especially if sweet foods are eaten between meals, and especially if the foods stick to their teeth, like raisins and jelly beans. Third, sugar seems to "hide in" packaged foods where we don't expect it. It goes by many names including dextrose, sucrose, fructose, glucose, maltose, lactose, corn syrup, natural sweeteners, honey, brown sugar and invert sugars. For example, you might think you are providing your child with a nutritious breakfast cereal only to read the food label and see that sugar is one of the first three ingredients. What you are really feeding your child for breakfast is candy. This is especially true of the cereals marketed to children. Always check the food labels for sugar content.

6. Avoid too much salt and sodium.

Children get a lot more salt and sodium than you might think. Canned products like canned vegetables, soups and spaghetti are high in sodium and so are pickles, olives, ketchup, and many cheeses. Try fresh or frozen vegetables instead of the canned, and occasionally serve fresh fruits or raw vegetables and dip instead of snacks like cheese, chips or pickles. Choose products marked low sodium when they are available.

Six of the 10 major diseases, like heart disease, high blood pressure, osteoporosis and some forms of cancer, are related to diet. Helping your child establish healthy eating while they are young can help them avoid these health risks when they are older.

Promoting
Wellness

A Nutrition,
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for Family Child Care Providers

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